Case 16-31409 Doc 1 Filed 09/30/16 Entered 09/30/16 18:05:18 Desc Main Document Page 1 of 64

| Fill in this information to identify your case: | |
|---|-------------------------------|
| United States Bankruptcy Court for the: | |
| Northern District of: Illinois (State) | <u></u> |
| Case number (if known) | Chapter you are filing under: |
| | Chapter 7 |
| | Chapter 11 Chapter 12 |
| | Chapter 13 |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | rt 1: Identify Yourself | | |
|----|---|----------------------------|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | Devin | |
| | Write the name that is on | First name | First name |
| | your government-issued picture identification (for | Middle name | Middle name |
| | example, your driver's license or passport | Griffin Last name | Last name |
| | | Last Haine | Last name |
| | Bring your picture identification to your meeting with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. | All other names you | | |
| | have used in the | First name | First name |
| | last 8 years | | |
| | Include your married or | Middle name | Middle name |
| | maiden names. | Last name | Last name |
| | | First name | First name |
| | | Middle name | Middle name |
| | | Last name | Last name |
| 3. | Only the last 4 digits of your | XXX - XX | xxx - xx- |
| | Social Security number or federal | OR | OR |
| | Individual Taxpayer Identification | 9 xx - xx- | 9 xx - xx- |
| | number (ITIN) | | |

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| De | ebtor 1 Devin | Griffin | Case number (if known) |
|----|---|---|--|
| | First Name | Middle Name Last Name | |
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 4. | Any business names and Employer | ✓ I have not used any business names or EINs. | I have not used any business names or EINs. |
| | Identification Numbers (EIN) you have used in the | Business name | Business name |
| | last 8 years | Business name | Business name |
| | Include trade names and doing business as names | EIN | EIN |
| | | EIN | EIN |
| 5. | Where you live | | If Debtor 2 lives at a different address: |
| | | 7218 S. Seeley Number Street | Number Street |
| | | Chicago Illinois 60636 | |
| | | City State Zip Code | City State Zip Code |
| | | Cook County | County |
| | | If your mailing address is different from the one above fill it in here. Note that the court will send any notices to you this mailing address. | |
| | | Number Street | Number Street |
| | | City State Zip Code | City State Zip Code |
| 6. | Why you are | · · | |
| | choosing this district to file for bankruptcy | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | Janin aproy | I have another reason. Explain. (See 28 U.S.C. §§ 1408 | 3.) I have another reason. Explain. (See 28 U.S.C. §§ 1408.) |
| | | | |
| | | | |
| | | | |
| | | | |

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| Depto | First Name | Middle Name | Last Name | | Case number (ii know | <i></i> | |
|-----------------------------------|---|---|---|--|---|--|---|
| Part 2 | | | | | | | |
| 7. Th Ba | ne chapter of the ankruptcy Code ou are choosing to e under | Check one. (For a b | rief description of each, see <i>Not</i> the top of page 1 and check the a | | | (b) for Individuals | s Filing for Bankruptcy (Form |
| | ow you will pay e fee | court for mor may pay with on your beha Individuals to I request that By law, a jud less than 150 the fee in ins | e entire fee when I file me details about how you re cash, cashier's check, calf, your attorney may pay by the fee in installments a Pay Your Filing Fee in Installments at my fee be waived (You ge may, but is not required to find the official poverty stallments). If you choose the fee Waived (Official Fee Waived (Official Fee | may pay. To may pay. To money of with a cress. If you chestallments (a may requed to, waiveline that apost this option | rypically, if you ander If your a dit card or checoose this option (Official Form 1) test this option e your fee, and oplies to your fan, you must fill | are paying the ttorney is subtended in the ttorney is subtended in the ttorney is subtended in the ttorney if you are may do so out the Application. | ne fee yourself, you printed address. tach the Application for the filing for Chapter 7. Inly if your income is the your are unable to pay |
| ba | ave you filed for ankruptcy within e last 8 years? | No. Yes. District District District | Northern District of Illinois | When When When | MM/DD/YYYY MM/DD/YYYY | Case number _ Case number _ Case number _ | 16-00270 |
| ca be sp fil yc bu | re any bankruptcy uses pending or eing filed by a bouse who is not ing this case with bu, or by a usiness partner, or y an affiliate? | ✓ No. Yes. Debtor District Debtor District | | When | MM / DD / YYYY | Relationship to y Case number, if Relationship to y Case number, if | known you |
| | o you rent your sidence? | ✓ No. | 12. landlord obtained an eviction judg Go to line 12. Fill out <i>Initial Statement About a</i> this bankruptcy petition. | | | | |

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| Debtor 1 Devin | | N 41-1- | | Griffin | Case number (ii | known) | |
|--|--|----------------------------|--|--|---|--|---|
| First Name Part 3: Report About An | y Bus | | _{lle Name} es You Own as a S | Last Name Sole Proprietor | | | |
| 12. Are you a sole proprietor of any full- or part-time business? A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. | | No. | Go to Part 4. Name and location of both states are states and location of both states and location of both states are states are states and location of both states are states and location of both states are states and location of both states are states are states and location of both states are states are states and location of both states are states are states and location of both states are states are states are states and location of both states are st | Street Street Street Street Street Street Street Street | State <i>Ir business:</i> n 11 U.S.C. § 101(27A)) ed in 11 U.S.C. § 101(51 | | |
| 13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. | dead opera | llines. If y ations, ca | ou indicate that you are a ash-flow statement, and 6(1)(B). I am not filing under Ch | a small business del federal income tax r napter 11. | otor, you must attach you eturn or if any of these d | ir most recent baland ocuments do not exi | ce sheet, statement of ist, follow the procedure in 11 |
| § 101(51D). | | Yes. | I am filing under Chapt | ter 11 and I am a sm | all business debtor acco | ording to the definition | n in the Bankruptcy Code. |
| Part 4: Report if You Ow | n or | Have A | Any Hazardous Pro | operty or Any F | Property That Need | ds Immediate A | Attention |
| 14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or | City State Zip Code aver more as sole Aver more as sole Check the appropriate box to describe your business: Tship, use a sheet and to this City State Zip Code Aver more as sole Check the appropriate box to describe your business: Tship, use a sheet and to this Commodity Broker (as defined in 11 U.S.C. § 101(27A)) Commodity Broker (as defined in 11 U.S.C. § 101(5B)) Stockbroker (as defined in 11 U.S.C. § 101(6B)) None of the above If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines; if you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). VSC. § 11 16(1)(B). No. I am not filing under Chapter 11. No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Yes. What is the hazard? A threat of not and ble hazard chealth or Or do you yor property dat a threat of not | | | | | | |
| safety? Or do you own any property | | , | Where is the property? | Niverban | Otro ot | | |
| that needs immediate attention? | | | | Number | Street | | |
| For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | | | City | State | 9 | Zip Code |

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Griffin Debtor 1 Devin Case number (if known) First Name Middle Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed about credit this bankruptcy petition, and I received a certificate of this bankruptcy petition, and I received a certificate of counseling. completion. completion. Attach a copy of the certificate and the payment plan, if any, Attach a copy of the certificate and the payment plan, if any, The law requires that that you developed with the agency. that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed counseling before this bankruptcy petition, but I do not have a this bankruptcy petition, but I do not have a you file for certificate of completion. certificate of completion. bankruptcy. You must truthfully check Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment one of the following plan, if any. plan, if any. choices. If you cannot do so, you are I certify that I asked for credit counseling services I certify that I asked for credit counseling services not eligible to file. from an approved agency, but was unable to obtain from an approved agency, but was unable to obtain those services during the 7 days after I made my those services during the 7 days after I made my If you file anyway, request, and exigent circumstances merit a 30-day request, and exigent circumstances merit a 30-day temporary waiver of the requirement. temporary waiver of the requirement. the court can dismiss your case, you will To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the requirement, lose whatever filing attach a separate sheet explaining what efforts you made to attach a separate sheet explaining what efforts you made to fee you paid, and obtain the briefing, why you were unable to obtain it before obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances you filed for bankruptcy, and what exigent circumstances your creditors can required you to file this case. required you to file this case. begin collection activities again. Your case may be dismissed if the court is dissatisfied with Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for your reasons for not receiving a briefing before you filed for bankruptcy. bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, the payment plan you developed, if any. If you do not do so, your case may be dismissed. your case may be dismissed. Any extension of the 30-day deadline is granted only for Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me incapable of deficiency that makes me incapable of

Disability. My physical disability causes me to be

unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

realizing or making rational decisions

to do so.

Active duty. I am currently on active military duty in

a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

realizing or making rational decisions

My physical disability causes me to be

unable to participate in a briefing in

internet, even after I reasonably tried

I am currently on active military duty in

person, by phone, or through the

a military combat zone.

about finances.

to do so.

If you believe you are not required to receive a briefing

about credit counseling, you must file a motion for waiver of

Disability.

Active duty.

credit counseling with the court.

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| | | (if known) |
|--|--|---|
| | | |
| 16a. Are your debts primarily 101(8) as "incurred by an No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily obtain money for a busine investment. No. Go to line 16c. Yes. Go to line 17. | consumer debts? Consumer dindividual primarily for a personal business debts? Business debts or investment or through the | al, family, or household purpose." bts are debts that you incurred to operation of the business or |
| Yes. I am filing under Chapter 7. Do | o you estimate that after any exempt prop | perty is excluded and administrative expenses are |
| ✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999 | 1,000-5,000 5,001-10,000 10,001-25,000 | ☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000 |
| ✓ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | |
| ✓ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | |
| | | |
| and correct. If I have chosen to file under Cl 11,12, or 13 of title 11, United S choose to proceed under Chapte If no attorney represents me an me fill out this document, I have I request relief in accordance w I understand making a false sta connection with a bankruptcy ca | hapter 7, I am aware that I may States Code. I understand the releer 7. Ind I did not pay or agree to pay se obtained and read the notice releth the chapter of title 11, United Itement, concealing property, or ase can result in fines up to \$25 2, 1341, 1519, and 3571. | proceed, if eligible, under Chapter 7, lief available under each chapter, and I someone who is not an attorney to help equired by 11 U.S.C. § 342(b). I States Code, specified in this petition. obtaining money or property by fraud in |
| | estions for Reporting Purpose 16a. Are your debts primarily 101(8) as "incurred by an No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily obtain money for a busine investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts yo No. I am not filing under Chapter 7. Depaid that funds will be available 17. 16c. State the type of debts you 1.49 No. Yes. 100-199 200-999 100-199 200-999 100-199 200-999 100-199 200-999 100-199 10 | estions for Reporting Purposes 16a. Are your debts primarily consumer debts? Consumer of 101(8) as "incurred by an individual primarily for a personation of the primarily business debts? Business debtain money for a business or investment or through the investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debtain money for a business or investment or through the investment. No. Go to line 17. 16c. State the type of debts you owe that are not consumer debtain and the type of debts you owe that are not consumer debtain debta will be available to distribute to unsecured creditors? Yes. I am filing under Chapter 7. Do you estimate that after any exempt proper paid that funds will be available to distribute to unsecured creditors? No. Yes. 1-49 1,000-5,000 50-99 50,001-10,000 \$50,001-\$100,000 \$50,001-\$100,000 \$50,001-\$100,000 \$50,001-\$100,000 \$50,001-\$100,000 \$50,001-\$100,000 \$50,001-\$100,000 \$50,001-\$100,000 \$50,001-\$100,000 \$50,001-\$100,000 \$50,001-\$100,000 \$50,001-\$100,000 \$50,000,01-\$500 million \$100,001-\$500 million \$100,001-\$500 million \$500,001-\$1 million \$100,001-\$500 million \$500,001-\$1 million \$100,001-\$500 million \$500,001-\$1 million \$100,001-\$500 |

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| Debtor 1 | Devin | | Griffin | Case number | (if known) |
|--|-----------------|--|--|--|--|
| | First Name | Middle Name | Last Name | | |
| you are by one If you a represe | | eligibility to proceed und the relief available undo to the debtor(s) the noti | der Chapter 7, 11, 12, over each chapter for white required by 11 U.S. | or 13 of title 11, Uich the person is C. § 342(b) and, i | that I have informed the debtor(s) about United States Code, and have explained eligible. I also certify that I have delivered in a case in which § 707(b)(4)(D) applies, nation in the schedules filed with the |
| | file this page. | /s/ Chris Pryor Signature of Attorney for | or Debtor | Date | 9/30/2016 MM / DD / YYYY |
| | | Chris Pryor Printed name Semrad Law Firm Firm name 11101 S. Western Aven Street | ue | | |
| | | Chicago | ı | llinois | 60643 |
| | | City | | State | Zip Code |
| | | Contact phone | | Email address | cpryor@semradlaw.com |
| | | Bar number | | Stat | te |

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| Fill in this information to identify your case: | | | | | |
|---|--------------------------|-------------|-----------------------------|--|--|
| Debtor 1 | Devin | | Griffin | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse, if filing | First Name | Middle Name | Last Name | | |
| United States B | ankruptcy Court for the: | Northern | District of Illinois(State) | | |
| Case number (If known) | | | (State) | | |

| П | Check if this is ar |
|---|---------------------|
| | amended filing |

12/15

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| Part 1: Summarize Your Assets | |
|--|---|
| | Your assets Value of what you own |
| 1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$0.00 |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$875.00 |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$875.00 |
| Part 2: Summarize Your Liabilities | |
| | Your liabilities Amount you owe |
| Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$0.00 |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$0.00 |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$7,628.00 |
| Your total liabilities | \$7,628.00 |
| Part 3: Summarize Your Income and Expenses | |
| 4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$390.00 |
| Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22, Column A, of Schedule J | \$395.00 |
| | |

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| De | btor 1 Devi | | | Griffin | Case n | umber (if known) | | _ |
|-------------|-----------------|--|--|---|--------------------|------------------------------|----------|---|
| | First | Name | Middle Name | Last Name | | | | |
| Par | t4: Ans | wer These Ques | stions for Administra | tive and Statistical R | ecords | | | |
| 6. / | Are you fili | ng for bankruptcy u | nder Chapters 7, 11, or 1 | 3? | | | | |
| | _ | u have nothing to rep | ort on this part of the form. (| Check this box and submit thi | is form to the co | ourt with your other schedul | es. | |
| | ✓ Yes. | | | | | | | |
| 7. \ | What kind | of debt do you hav | e? | | | | | |
| | | | | er debts are those incurred b ut lines 8-10 for statistical pu | | | | |
| | | lebts are not primar m to the court with yo | - | nave nothing to report on this | s part of the form | n. Check this box and subm | nit | |
| 8. | | | Current Monthly Income 1 122B Line 11; OR, Form 1 | : Copy your total current mor 22C-1 Line 14. | nthly income fro | m Official | \$405.00 | |
| 9. | Copy the | e following special o | categories of claims from | Part 4, line 6 of Schedule | E/F: | | | |
| | From Pa | rt 4 on Schedule E/ | F, copy the following: | | | Total claim | | |
| | 9a. Dome | estic support obligation | ons (Copy line 6a.) | | | \$0.00 | | |
| | 9b. Taxes | and certain other del | ots you owe the government | . (Copy line 6b.) | | \$0.00 | | |
| | 9c. Claim | s for death or person | al injury while you were into | xicated. (Copy line 6c.) | | \$0.00 | | |
| | 9d. Stude | ent loans. (Copy line 6 | of.) | | | \$0.00 | | |
| | | • | | ivorce that you did not repor | t as | \$0.00 | | |
| | priority cl | aims. (Copy line 6g.) | | | | | | |
| | 9f. Debts | to pension or profit-s | haring plans, and other sim | ilar debts. (Copy line 6h.) | | \$0.00 | | |
| | 9g. Tota | I. Add lines 9a throug | h 9f. | | Ī | \$0.00 | | |

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| Fill in this | information to identify your cas | e: | | | | |
|------------------------|--|---------------------------------------|---|----------------------------|---|--|
| Debtor 1 | Devin | | Griffin | | | |
| | First Name | Middle N | ame Last Na | me | | |
| Debtor 2 (Spouse, i | if filing) First Name | Middle N | ame Last Na | me | | |
| | | | | | | |
| Jnited Sta | ates Bankruptcy Court for the: | Northern | District of Illin | ate) | | |
| Case num | | | (00 | | | |
| f known) | | | | | | |
| Officia | al Form 106A/B | | | | | Check if this is an amended filing |
| cho | dule A/B: Prope | ortv | | | | · · |
| | ategory, separately list and de | | | | | 1 |
| rite your Part 1: | ole for supplying correct informame and case number (if known and case number (if known and case number (if known are best or each area) | nown). Answer eve nce, Building, I | ery question. Land, or Other Rea | I Estate You Own | or Have an Interest In | |
| ı. Do yol | u own or have any legal or ed No. Go to Part 2 | juitable interest in | any residence, building | y, iariu, or similar propo | erty f | |
| | Yes. Where is the property? | | | | | |
| 1.1 | Street address, if available, or | other description | What is the property? Single-family home Duplex or multi-unit | | Do not deduct secured of the amount of any secure Creditors Who Have Cla | ed claims on <i>Sⁱchedule D</i> |
| | | | Condominium or coo | operative | Current value of the entire property? | Current value of the portion you own? |
| | Number Street | | Land Investment property Timeshare Other | | Describe the nature of interest (such as fee s the entireties, or a life | imple, tenancy by |
| | City State | Zip Code | Who has an interest in one. Debtor 1 only | n the property? Check | Check if this is co (see instructions) | mmunity property |
| | | | Debtor 2 only Debtor 1 and Debtor At least one of the de | • | | |
| | | | Other information you | wish to add about this | s item, such as local | |
| If you | own or have more than one, list | here: | what is the property? | n number <u>:</u> | Do not deduct secured o | laims or exemptions. Pu |
| 1.2 | Street address, if available, or | other description | Single-family home Duplex or multi-unit | , | the amount of any secur Creditors Who Have Cla | ed claims on <i>Schedule E</i> aims Secured by Proper |
| | | | Condominium or coo | • | Current value of the entire property? | Current value of the portion you own? |
| | Number Street | | Land Investment property Timeshare | | Describe the nature of interest (such as fee s | imple, tenancy by |
| | City State | Zip Code | Other | | the entireties, or a life | estate), if known. |

Official Form 106A/B Schedule A/B: Property page 1

Debtor 1 and Debtor 2 only

property identification number:

Debtor 1 only
Debtor 2 only

Who has an interest in the property? Check

At least one of the debtors and another

Other information you wish to add about this item, such as local

Check if this is community property (see instructions)

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| Debtor 1 | Devin First Name | Middle Name | Griffin Last Name | Case number | (if known) | |
|--------------------------------|--|--------------------|--|-----------------|--|--|
| 1.3Stre | et address, if available, or other | | What is the property? Check all that app Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home | ly. | Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the entire property? | • |
| Num | | ip Code | Land Investment property Timeshare Other | | Describe the nature of interest (such as fee sinth entireties, or a life of the check if this is continuous to the check if the chec | nple, tenancy by estate), if known. |
| | |]]] 0 | Who has an interest in the property? O Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add abooroperty identification number: | | (see instructions) | шин ргорогу |
| | | | all of your entries from Part 1, including | | | |
| Do you ov you own th | at someone else drives. If you leanns, trucks, tractors, sport utility v | ase a vehicle, als | n any vehicles, whether they are regist so report it on Schedule G: Executory Cont cles | | | |
| Yes | 3 | | | | | |
| 3.1 | Make Model: Year: | | Who has an interest in the propert one. Debtor 1 only | y? Check | Do not deduct secured of the amount of any secure Creditors Who Have Cla | • |
| | Approximate mileage: Other information: | | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and and Check if this is community projinstructions) | | Current value of the entire property? | Current value of the portion you own? |
| 3.2 | Make Model: Year: Approximate mileage: Other information: | | Who has an interest in the propert one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and and | | Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the entire property? | |
| | | | Check if this is community propinstructions) | perty (see | | |

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| Debtor 1 | Devin | A.C.I.I. A.I | Griffin | Case number | (if known) | |
|----------|--|------------------------|---|----------------|---------------------------------------|--|
| | First Name | Middle Name | Last Name | | 5 | |
| 3.3 | Make Model: Year: | | Who has an interest in the proper one. Debtor 1 only | rty? Check | the amount of any secure | laims or exemptions. Put ed claims on Schedule D: aims Secured by Property. |
| | Approximate mileage: Other information: | | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and an | | Current value of the entire property? | Current value of the portion you own? |
| | | | Check if this is community proinstructions) | operty (see | | |
| 3.4 | Make Model: Year: | | Who has an interest in the proper one. Debtor 1 only | rty? Check | the amount of any secure | laims or exemptions. Put ed claims on <i>Schedule D:</i> nims Secured by Property. |
| | Approximate mileage: Other information: | | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and an | oother | Current value of the entire property? | Current value of the portion you own? |
| | | | Check if this is community proinstructions) | | | |
| | mples: Boats, trailers, motors, p No Yes | ersonal watercraft, fi | ishing vessels, snowmobiles, motorcy | cle accessorie | s | |
| 4.1 | Make Model: Year: | | Who has an interest in the proper one. Debtor 1 only | rty? Check | the amount of any secure | laims or exemptions. Put ed claims on Schedule D: nims Secured by Property. |
| | Approximate mileage: Other information: | | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and an Check if this is community proinstructions) | | Current value of the entire property? | Current value of the portion you own? |
| 4.2 | Make | | Who has an interest in the proper one. Debtor 1 only | rty? Check | the amount of any secure | laims or exemptions. Put ed claims on Schedule D: nims Secured by Property. |
| | Approximate mileage: Other information: | | Debtor 2 only Debtor 1 and Debtor 2 only | a. | Current value of the entire property? | Current value of the portion you own? |
| | | | At least one of the debtors and an Check if this is community proinstructions) | | | |
| | | | of your entries from Part 2, includin | | | |

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| D | ebtor 1 | | | Griffin | Case number (if known) | |
|----------|------------------------------------|------------------------|--|--------------------------------|-----------------------------|--|
| Pa | art 3: | First Name Describe Y | Middle Name Your Personal and Household I | Last Name | | |
| | | | ave any legal or equitable inte | | owing items? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | | _ | s and furnishings diances, furniture, linens, china, kitchenwa | are | | |
| ᆫ | No | | | | | |
| ✓ | Yes. D | escribe | Good and furniture | | | \$275.00 |
| | ' . Elect ı Exampl No | | s and radios; audio, video, stereo, and dig | gital equipment; computers, pr | rinters, scanners; music | |
| <u>_</u> | | escribe | Used electronics | | | \$150.00 |
| | Examp | • | lue and figurines; paintings, prints, or other ar in, or baseball card collections; other coll | | • | |
| | Yes. D | escribe | | | | |
| | | les: Sports, ph | orts and hobbies notographic, exercise, and other hobby eq s; carpentry tools; musical instruments | uipment; bicycles, pool tables | , golf clubs, skis; canoes |] |
| ✓ | No | | | | | |
| | Yes. D | escribe | | | | |
| | No | | les, shotguns, ammunition, and related ec | quipment | |] |
| | 1. Clot Examp | | clothes, furs, leather coats, designer wear | r, shoes, accessories | |] |
| | No | | | | | |
| ✓ | Yes. D | escribe | Clothing | | | \$350.00 |
| | | • | ewelry, costume jewelry, engagement ring er | ıs, wedding rings, heirloom je | welry, watches, gems, | |
| Ė | | escribe | | | | 1 |
| | 3. Non | -farm animal | s, birds, horses | | | |
| | No . | • | | | | |
| Ė | | escribe | | | | |
| 1 | 4. Anv | other persor | al and household items you did not a | Iready list, including any he | ealth aids you did not list | |
| | No | | | , , | | |
| Ė | | escribe | | | | |
| | | | lue of all of your entries from Part 3, i | | = - | \$775.00 |
| f | or Part | 3. Write that | number here | | > | |

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| Debt | or 1 | Devin | | Griffin | Case number (if known) | |
|--------------|--------------|------------------------|---|----------------------------|--|--|
| | | First Name | Middle Name | Last Name | | |
| Part 4 | 4: | Describe Your F | inancial Assets | | | |
| Do | you | own or have a | ny legal or equitable inte | erest in any of the f | ollowing? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 16. C | ash | | | | | |
| Е | xamp | ples: Money you have | e in your wallet, in your home, in a s | afe deposit box, and on ha | nd when you file your petition | |
| | | No | | | | |
| | ✓ | Yes | | | Cash: | \$25.00 |
| | Exa | | vings, or other financial accounts; titutions. If you have multiple acco | | ares in credit unions, brokerage houses, | |
| | ✓ | No | | | | |
| | | Yes | | Institution name: | | |
| | | | | | | |
| | | | 17.1. Checking account: | | | |
| | | | 17.2. Checking account: | | | |
| | | | 17.3. Savings account: | | | |
| | | | 17.4. Savings account: | | | |
| | | | 17.5. Certificates of deposit: | | | |
| | | | 17.6. Other financial account: | | | |
| | | | 17.7. Other financial account: | | | |
| | | | 17.8. Other financial account: | | | |
| | | | 17.9. Other financial account: | | | |
| | | | or publicly traded stocks | | | |
| | | | vestment accounts with brokerage | tirms, money market acco | ounts | |
| | | No | Institution or issuer name: | | | |
| | Ш | Yes | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | ed and unincorporated | businesses, including an interest in | |
| | | LC, partnership, a | and joint venture | | | |
| | \mathbf{M} | No | Name of entity | | % of ownership: | |
| | Ш | Yes. Give specific | Name or entity | | 76 Or Ownership. | |
| | | information about them | | | | |
| | | | | | | |
| | | | | | | |

Official Form 106A/B Schedule A/B: Property page 5

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| Deb | tor 1 | Devin | | Griffin | Case number (if known) | |
|---|----------|--|---|----------------------------------|---------------------------------------|--------------|
| | | First Name | Middle Name | Last Name | | |
| 20. | | | orate bonds and other negotia | | | |
| Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. | | | | | | |
| | V | No | • | , , , | · · | |
| | П | Yes. Give specific | | | | |
| | | information about | Issuer name: | | | |
| | | them | | | | |
| | | | | | | |
| | | | | | | |
| 24 | Dat | iromant or nancion | | | | |
| 21. | Exa | tirement or pension amples: Interests in IR | A, ERISA, Keogh, 401(k), 403(b) | , thrift savings accounts, or | other pension or profit-sharing plans | |
| | ✓ | No | | | | |
| | | Yes. List each | Type of account: | Institution name: | | |
| | | account | 401(k) or similar plan: | | | |
| | | separately. | Pension plan: | | | |
| | | | IRA: | | | |
| | | | Retirement account: | | | |
| | | | Keogh: | | | |
| | | | Additional account: | | | - |
| | | | Additional account: | | | |
| | _ | | | | | - |
| 22. | | curity deposits and pure share of all unused | prepayments deposits you have made so that yo | u may continue service or u | se from a company | |
| | Exa | imples: Agreements v | with landlords, prepaid rent, public | | | |
| | con | npanies, or others | | Institution name: | | |
| | | No | | institutori name. | | |
| | ш | Yes | Electric: | | | - |
| | | | Gas: | | | |
| | | | Heating oil: | | | - |
| | | | Security deposit on rental unit: | | | |
| | | | Prepaid rent: | | | |
| | | | Telephone: | | | |
| | | | Water: | | | |
| | | | Rented furniture: | | | |
| | | | Other: | | | |
| 23. | Anı | nuities (A contract for | a periodic payment of money to y | vou, either for life or for a nu | mber of years) | • |
| | ✓ | No | | | | |
| | | Yes | Issuer name and description: | | | |
| | | | | | | . |
| | | | | | | |
| | | | | | | |

Official Form 106A/B Schedule A/B: Property page 6

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| Debt | or 1 Devin First Name Midd | Griffin le Name Last Name | Case number (if known) | |
|------|---|--|--|--|
| 24. | | count in a qualified ABLE program, or under a | qualified state tuition program | |
| | 26 U.S.C. §§ 530(b)(1), 529A(b), and 529 | | | |
| | No Institution name and description Yes | iption. Separately file the records of any interests.11 l | J.S.C. § 521(c): | |
| | | | | |
| | | | | |
| | | | | |
| 25. | Trusts, equitable or future interests in exercisable for your benefit | n property (other than anything listed in line 1), a | and rights or powers | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| | | | | |
| 26. | | e secrets, and other intellectual property | • | |
| | | es, proceeds from royalties and licensing agreement | 5 | |
| | ✓ No | | | 7 |
| | Yes. Describe | | | |
| | | | | |
| 27. | Licenses, franchises, and other gener Examples: Building permits, exclusive lice | al intangibles enses, cooperative association holdings, liquor licens | ses, professional licenses | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| | | | | 7 |
| | | | | |
| Mor | ney or property owed to you? | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | ney or property owed to you? Tax refunds owed to you | | | portion you own? Do not deduct secured |
| | | | | portion you own? Do not deduct secured |
| | Tax refunds owed to you ✓ No ✓ Yes. Give specific information | | Federal: | portion you own? Do not deduct secured |
| | Tax refunds owed to you ✓ No ✓ res. Give specific information about them, including whether | | Federal: State: | portion you own? Do not deduct secured claims or exemptions. |
| | Tax refunds owed to you ✓ No ✓ Yes. Give specific information | | State: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 |
| 28. | Tax refunds owed to you ✓ No Yes. Give specific information about them, including whether you already filed the returns and the tax years | | | portion you own? Do not deduct secured claims or exemptions. \$0.00 |
| 28. | Tax refunds owed to you ✓ No Yes. Give specific information about them, including whether you already filed the returns and the tax years | spousal support, child support, maintenance, divorce | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 |
| 28. | Tax refunds owed to you ✓ No Yes. Give specific information about them, including whether you already filed the returns and the tax years | spousal support, child support, maintenance, divorce | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 |
| 28. | Tax refunds owed to you ✓ No Yes. Give specific information about them, including whether you already filed the returns and the tax years Family support Examples: Past due or lump sum alimony, s | spousal support, child support, maintenance, divorce | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 |
| 28. | Tax refunds owed to you ✓ No Yes. Give specific information about them, including whether you already filed the returns and the tax years Family support Examples: Past due or lump sum alimony, so | spousal support, child support, maintenance, divorce | State: Local: settlement, property settlement | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed to you ✓ No Yes. Give specific information about them, including whether you already filed the returns and the tax years Family support Examples: Past due or lump sum alimony, so | spousal support, child support, maintenance, divorce | State: Local: settlement, property settlement Alimony: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed to you ✓ No Yes. Give specific information about them, including whether you already filed the returns and the tax years Family support Examples: Past due or lump sum alimony, so | spousal support, child support, maintenance, divorce | State: Local: settlement, property settlement Alimony: Maintenance: | \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed to you ✓ No Yes. Give specific information about them, including whether you already filed the returns and the tax years Family support Examples: Past due or lump sum alimony, so | spousal support, child support, maintenance, divorce | State: Local: settlement, property settlement Alimony: Maintenance: Support: | \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed to you ✓ No Yes. Give specific information about them, including whether you already filed the returns and the tax years Family support Examples: Past due or lump sum alimony, s ✓ No Yes. Give specific information | | State: Local: settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed to you ✓ No Yes. Give specific information about them, including whether you already filed the returns and the tax years Family support Examples: Past due or lump sum alimony, s ✓ No Yes. Give specific information | spousal support, child support, maintenance, divorce since payments, disability benefits, sick pay, vacation palloans you made to someone else | State: Local: settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed to you ✓ No Yes. Give specific information about them, including whether you already filed the returns and the tax years Family support Examples: Past due or lump sum alimony, s ✓ No Yes. Give specific information | nce payments, disability benefits, sick pay, vacation pa | State: Local: settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed to you ✓ No Yes. Give specific information about them, including whether you already filed the returns and the tax years Family support Examples: Past due or lump sum alimony, s ✓ No Yes. Give specific information Other amounts someone owes you Examples: Unpaid wages, disability insurar Social Security benefits; unpaid | nce payments, disability benefits, sick pay, vacation pa | State: Local: settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |

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| Deb | tor 1 Devin | Griffin | Case number (if known) | |
|------|---|--|---|---|
| | First Name Middle Nan | ne Last Name | | |
| 31. | Interests in insurance policies Examples: Health, disability, or life insurance; h | ealth savings account (HSA); credit, h | omeowner's, or renter's insurance | |
| | Yes. Name the insurance company of each policy and list its value | Company name: | Beneficiary: | Surrender or refund value: |
| 32. | Any interest in property that is due you from If you are the beneficiary of a living trust, expect property because someone has died. | | or are currently entitled to receive | |
| | ✓ No Yes. Describe | | | |
| 33. | Claims against third parties, whether or not Examples: Accidents, employment disputes, ins | | demand for payment | |
| | ✓ No Yes. Describe | | | |
| 34. | Other contingent and unliquidated claims to set off claims | of every nature, including counterd | claims of the debtor and rights | |
| | ✓ No Yes. Describe | | | |
| 35. | Any financial assets you did not already list | | | |
| | ✓ No Yes. Describe | | | |
| 36. | Add the dollar value of all of your entries fr for Part 4. Write that number here | | | \$100.00 |
| Part | 5: Describe Any Business-Related | Property You Own or Have a | n Interest In. List any real estate | in Part 1. |
| 37. | Do you own or have any legal or equitable i | nterest in any business-related prop | perty? | |
| | No. Go to Part 6. Yes. Go to line 38. | | С р С | Current value of the ortion you own? On not deduct secured claims or exemptions |
| 38. | Accounts receivable or commissions you al | ready earned | | |
| | Yes. Describe | | | |
| 39. | Office equipment, furnishings, and supplied Examples: Business-related computers, softwar | | hines, rugs, telephones, desks, chairs, electro | nic devices |
| | ✓ No Yes. Describe | | | |
| | | | | |

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| Deb | tor 1 Devin | Griffin Case number (if known) | |
|-------|-----------------------------------|--|---|
| 40. | First Name Machinery fixtures ed | Middle Name Last Name quipment, supplies you use in business, and tools of your trade | |
| 40. | _ | pupitient, supplies you use in business, and tools of your trade | |
| | ✓ No Yes. Describe | | |
| | res. Describe | | |
| | | | |
| 41. | Inventory | | |
| | ✓ No | | |
| | Yes. Describe | | |
| | | | |
| 42. | Interests in partnersh | ips or joint ventures | |
| | ✓ No | | |
| | Yes. Give specific | Name of entity: % of ownership: | |
| | information about | | |
| | them | | |
| | | | |
| 12.4 | Customor lists, mailing | lists, or other compilations | |
| 43. (| | lists, or other compliations | |
| | ✓ No | | |
| | Yes. Do your lists in | clude personally identifiable information (as defined in 11 U.S.C. § 101(41A))? | |
| | ☐ No | | |
| | Yes. Desc | ribe | |
| 44 | Any business-related | property you did not already list | |
| | | stoperty you did not uneddy not | |
| | ✓ No | 9 | |
| | Yes. Give specific information | | |
| | | | |
| | | | |
| | | | - |
| | | | |
| | | | |
| | | | |
| | | Il of your entries from Part 5, including any entries for pages you have attached | |
| for P | art 5. Write that number | r here | |
| Part | | Farm- and Commercial Fishing-Related Property You Own or Have an Interest In ninterest in farmland, list it in Part 1. | 1. |
| 46. | Do you own or have a | ny legal or equitable interest in any farm- or commercial fishing-related property? | |
| | ✓ No. Go to Part 7. | | Current value of the |
| | Yes. Go to line 47. | | portion you own? Do not deduct secured |
| | | | claims |
| 47 | Farm animals | | or exemptions |
| 4/. | Examples: Livestock, po | ultry, farm-raised fish | |
| | √ No | | |
| | Yes. Describe | | |
| | L 103. Describe | | |
| | | | |

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| Debt | tor 1 Devin | | Griffin | Case number (if known) | |
|--------------|----------------------------|---|--------------------------|--------------------------------|------------|
| | First Name | Middle Name | Last Name | | |
| 48. | Crops-either growing | or harvested | | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | res. Describe | | | | |
| | | | | | |
| 49. | Farm and fishing equ | ipment, implements, machinery, fixtu | res, and tools of trade | | |
| | _ | ,,, | | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| | | | | | |
| 50. | Farm and fishing sup | plies, chemicals, and feed | | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| | | <u> </u> | | · | |
| 51. | Any farm- and commo | ercial fishing-related property you did | not already list | | |
| | □ No | | | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| | | , | | Г | |
| 52. A | dd the dollar value of a | all of your entries from Part 6, includir | ng any entries for pages | you have attached | |
| for Pa | art 6. Write that numbe | r here | | > | |
| | | | | _ | |
| | | | | | |
| | December All D | | | Std Mark Link Albania | |
| Part | | roperty You Own or Have an In | | DIG NOT LIST Above | |
| 53. | | pperty of any kind you did not already ts, country club membership | list? | | |
| | | is, country club membership | | | |
| | ✓ No | | | | |
| | Yes. Give specific | | | | |
| | information | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| 54. A | dd the dollar value of a | III of your entries from Part 7. Write th | at number here | > | |
| | | | | | |
| | | | | | |
| D4 | O Liet the Tetale | of Fook Bort of this Form | | | |
| Part | 8: List the lotals | of Each Part of this Form | | | 1 |
| 55 C | Part 1: Total roal actato | , line 2 | | _ | |
| 33. F | art i. iotarrearestate | , iiile 2 | | | |
| 56 r | oart 2 total vehicles, lin | o 5 | | | |
| _ | | | | - | |
| 5/.P | art 3: Total personal a | nd household items, line 15 | \$775.00 | _ | |
| 58. P | art 4: Total financial as | sets, line 36 | \$100.00 | | |
| | | | \$100.00 | - | |
| 59. F | art 5: Total business- | elated property, line 45 | | _ | |
| 60. F | Part 6: Total farm- and | fishing-related property, line 52 | | | |
| | | | | - | |
| 61. F | Part 7: Total other prop | erty not listed, line 54 | | _ | |
| 62. 1 | Total personal property | . Add lines 56 through 61 | ¢975.00 | | , ¢07F 00 |
| | , p. p. p. p. s. | 3 | \$875.00 | Copy personal property total ► | + \$875.00 |
| | | | | Top, poroonal property total p | |
| | | | | | \$875.00 |
| 63. T | otal of all property on | Schedule A/B. Add line 55 + line 62 | | | |

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| Debtor 1 | Devin | | Griffin | Case number (if known) | |
|----------|----------------|-------------|-----------|------------------------|--|
| | First Name | Middle Name | Last Name | | |
| | - - | | | | |

Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following items? Do not deduct secured claims or exemptions. 16.2. Cash No Yes. Describe... Cash on hand \$75.00

Official Form 106A/B Schedule A/B: Property page 11

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| Fill in this information to identify your case: | | | | | | |
|---|---------------|-------------|-----------------------------|--|--|--|
| Debtor 1 | Devin | | Griffin | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filin | g) First Name | Middle Name | Last Name | | | |
| United States Bankruptcy Court for the: | | Northern | District of Illinois(State) | | | |
| Case number (If known) | | | (2.5) | | | |

Official Form 106C

Check if this is an amended filing

Schedule C: The Property You Claim as Exempt

correct

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Par | t 1: Identify the Property You Cla | im as Exempt | | | | | |
|-----|---|---|---|------------------------------------|--|--|--|
| 1. | Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. ✓ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ✓ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) For any property you list on Schedule A/B that you claim as exempt, fill in the information below. | | | | | | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption you claim Check only one box for each exemption. | Specific laws that allow exemption | | | |
| | Brief description: Clothing Line from Schedule A/B: 11 | \$350.00 | \$350.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(a) | | | |
| | Brief description: Good and furniture Line from Schedule A/B: 06 | \$275.00 | \$275.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) | | | |
| 3. | Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every No Yes. Did you acquire the property cover No Yes | 3 years after that for ca | | | | | |

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| Debtor | | | Griffin | Case number (if known) | |
|---------|--|---|--------------------------------|--|------------------------------------|
| | First Name Middl | e Name | Last Name | | |
| Part 2: | Additional Page | | | | |
| lin | ief description of the property and e on Schedule A/B that lists this operty | Current value of the portion you own Copy the value from Schedule A/B | | temption you claim x for each exemption. | Specific laws that allow exemption |
| Lin | ief scription: Bank of America ne from shedule A/B:16 | \$25.00 | 100% of fair m applicable stat | \$25.00 arket value, up to any tutory limit | 735 ILCS 5/12-1001(b) |
| Lin | ief scription: Used electronics ne from schedule A/B: 07 | \$150.00 | 100% of fair m applicable stat | \$150.00 arket value, up to any tutory limit | 735 ILCS 5/12-1001(b) |
| Lin | ief scription: Cash on hand ne from thedule A/B: 16 | \$75.00 | 100% of fair m applicable stat | \$75.00 arket value, up to any tutory limit | 735 ILCS 5/12-1001(b) |

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| | | | _ | | | |
|-----------------|------------------------------------|---|--|--|-----------------------------------|---------------------------------------|
| Fill in | n this information to identify you | r case: | | | | |
| Debt | tor 1 Devin | | Griffin | | | |
| | First Name | Middle Name | Last Name | | | |
| Debt | | | | | | |
| (Spo | use, if filing) First Name | Middle Name | Last Name | | | |
| Unite | ed States Bankruptcy Court for t | he: Northern | District of Illinois | | | |
| | | | (State) | | | |
| Case (If kno | e number | | | | | |
| (II KIII | OWII) | | | <u> </u> | | |
| Off | icial Form 106l |) | | | Ц | Check if this is ar amended filing |
| Sc | hadula D. Cra | ditors Who Ha | ve Claims Secu | red by Pro | | · · |
| | neddie D. Ore | altors willo ma | ve Claims Secu | ica by i io | perty | 12/1 |
| space | | | are filing together, both are equa e entries, and attach it to this for | • | | |
| 1. | Do any creditors have claims | secured by your property? | | | | |
| | No. Check this box and su | bmit this form to the court with yo | ur other schedules. You have nothing | g else to report on this fo | orm. | |
| | Yes. Fill in all of the inform | ation below. | ` | , | | |
| Part | 1: List All Secured Cla | ims | | | | |
| 2. | List all secured claims. If a cr | editor has more than one secure | ed claim, list the creditor separately | Column A | Column B | Column C |
| | | e creditor has a particular claim, ns in alphabetical order accordin | list the other creditors in Part 2. As g to the creditor's name. | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports | Unsecured portion If any |
| | | | | | this claim | |

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| Filli | in this inform | ation to identify your cas | e: | | | | | |
|--|---|--|--|---|--|--|---|--|
| Deb | otor 1 | Devin | | Griffin | | | | |
| | | First Name | Middle Name | Last Name | | | | |
| | otor 2 | | 1 P 1 H 1 | | | | | |
| (Spo | ouse, it tiling | First Name | Middle Name | Last Name | | | | |
| Unit | ted States Ba | ankruptcy Court for the: | Northern | District of Illinois | | | | |
| Can | se number | | | (State) | | | | |
| | nown) | - | | | | | | |
| Off | ficial F | orm 106E/F | | | | Ch | eck if this is ar | n amended filing |
| | | | ditoro Who | Haya Haaa | urad Claima | | | |
| <u> </u> | neau | ile E/F: Cre | cultors who | nave unsec | ured Claims | | | 12/15 |
| party 106A that entri knov | / to any exe VB) and on are listed in es in the bo vn). | cutory contracts or un Schedule G: Executor Schedule D: Creditor oxes on the left. Attach | expired leases that could y Contracts and Unexpire s Who Hold Claims Secui | result in a claim. Also list of Leases (Official Form 10 and by Property. If more so this page. On the top of | and Part 2 for creditors with executory contracts on <i>Sch</i> 06G). Do not include any cre pace is needed, copy the Pa any additional pages, write | nedule A/B. editors with art you nee | : Property (Of n partially sec ed, fill it out, n | fficial Form cured claims number the |
| | | | | | | | | |
| 1. | | o to Part 2. | secured claims against yo | ou r | | | | |
| | Yes. | 0.01 4.12. | | | | | | |
| 2. | listed, iden much as po Continuation | ify what type of claim it is ossible, list the claims in a on Page of Part 1. If more | s. If a claim has both priority a | and nonpriority amounts, list to the creditor's name. If yo particular claim, list the other | | n priority and | d nonpriority ar | mounts. As |
| | | | | | | Total claim | Priority amount | Nonpriority amount |

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| Debte | or 1 Devin Grif | | |
|--------|--|---|------------------|
| | | Name | |
| Part 2 | 2: List All of Your NONPRIORITY Unsecured Claims | 5 | |
| 3. | Do any creditors have nonpriority unsecured claims against you | 1? | |
| | No. You have nothing to report in this part. Submit this form to the Yes. | court with your other schedules. | |
| | | order of the creditor who holds each claim. If a creditor has more t | han one priority |
| | · · · · · · · · · · · · · · · · · · · | claim listed, identify what type of claim it is. Do not list claims already inc | |
| | If more than one creditor holds a particular claim, list the other creditor Page of Part 2. | rs in Part 3.lf you have more than four priority unsecured claims fill out the | ne Continuation |
| 1 | rage of ranz. | | Total claim |
| 4.1 | FIRST PREMIER BANK | | \$544.00 |
| 7.1 | Nonpriority Creditor's Name | Last 4 digits of account number | ΨΟ-100 |
| | Jefferson Capital Systems, LLC PO Box 7999 Number Street | When was the debt incurred? 12/1/2013 | |
| | c/o Kelly Lukason | As of the date you file, the claim is: Check all that apply. | |
| | Saint Cloud Minnesota 56302 | Contingent | |
| | City State Zip Code | Unliquidated | |
| | Who incurred the debt? Check one. Debtor 1 only | Disputed | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | Check if this claim relates to a community debt | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar | |
| | Is the claim subject to offset? | debts | |
| | No | ✓ Other. Specify <u>CreditCard</u> | |
| | Yes | | |
| 4.2 | ILLINOIS COLLECTION SE | | \$551.00 |
| 1.2 | Nonpriority Creditor's Name | Last 4 digits of account number 5262 | ψοσ1.00 |
| | 8231 185TH ST STE 100 Number Street | When was the debt incurred? 11/1/2012 | |
| | · · · · · · · · · · · · · · · · · · · | As of the date you file, the claim is: Check all that apply. | |
| | TINLEY PARK Illinois 60487 | Contingent | |
| | City State Zip Code | Unliquidated | |
| | Who incurred the debt? Check one. Debtor 1 only | Disputed | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar | |
| | Is the claim subject to offset? | debts 001 Collection; Collecting for | |
| | ✓ No | ORIGINAL CREDITOR: | |
| | Yes | Other. Specify <u>MEDICAL PAYMENT DATA</u> | |
| 4.3 | PEOPLES E CU Nonpriority Creditor's Name | Last 4 digits of account number 7628 | \$5,275.00 |
| | 200 East Kandolph | When was the debt incurred?1/1/2014 | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | ChicagoIllinois60601CityStateZip Code | Unliquidated | |
| | Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | Other. Specify 37 InstallmentLoan | |
| | ✓ No | . / | |
| | Yes | | |

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Griffin Debtor 1 Devin Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** PINNACLE LLC/RESURGENT 4.4 \$558.00 Last 4 digits of account number ___ Nonpriority Creditor's Name 810 1ST ST S STE 260 When was the debt incurred? 8/1/2014 Number Street As of the date you file, the claim is: Check all that apply. Contingent **HOPKINS** Minnesota 55343 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? Other. Specify 001 UnknownLoanType **✓** No Yes UNTD RCVY GR 4.5 \$700.00 Last 4 digits of account number Nonpriority Creditor's Name 11639 S 700 E SUITE 200 When was the debt incurred? 12/1/2010 Number As of the date you file, the claim is: Check all that apply. Contingent **DRAPER** Utah 84020 Unliquidated State Zip Code City Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Is the claim subject to offset? **V** Collection; Collecting for **✓** No ORIGINAL CREDITOR: 01

Other. Specify EAGLE ATLANTIC FINANCIAL

Yes

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Griffin Debtor 1 Devin Case number (if known) First Name Middle Name Last Name Add the Amounts for Each Type of Unsecured Claim Part 4: Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 **Total claims** 6a. Domestic support obligations. from Part 1 \$0.00 6b. Taxes and certain other debts you owe the government 6b 6c. Claims for death or personal injury while you were \$0.00 intoxicated \$0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. \$0.00 6e. Total. Add lines 6a through 6d. 6e. **Total claims** \$0.00 **Total claims** 6f. Student loans 6f. from Part 2 \$0.00 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar 6h. debts \$7,628.00 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. \$7,628.00 6j. Total. Add lines 6f through 6i.

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| Fill in this info | ormation to identify your cas | se: | | | | | |
|---|----------------------------------|--------------------------------|--------------------------------------|---|---------------------------------------|--|--|
| Debtor 1 | Devin | | Griffin | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | | | | | | | |
| (Spouse, if fil | ^{ing)} First Name | Middle Name | Last Name | | | | |
| United States | Bankruptcy Court for the: | Northern | District of Illinois | | | | |
| | | | (State) | | | | |
| Case number | r | | | | | | |
| (If known) | | | | | | | |
| Official | Form 106G | | | | Check if this is an amended filing | | |
| Sched | ule G: Execut | ory Contract | s and Unexpir | red Leases | 12/15 | | |
| Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known). | | | | | | | |
| 1. Do you | have any executory | contracts or unexpi | red leases? | | | | |
| ✓ No. C | check this box and file this fo | orm with the court with your o | other schedules. You have no | othing else to report on this form. | | | |
| Yes. F | Fill in all of the information b | elow even if the contracts of | r leases are listed on <i>Schedu</i> | ule A/B: Property (Official Form 106A/B). | | | |
| | | | | hen state what each contract or lease is for e examples of executory contracts and unexpir | | | |

State what the contract or lease is for

Person or company with whom you have the contract or lease

Official Form 106G

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| Fill in this inf | formation to identify your cas | se: | | |
|------------------------|--|---|---|---|
| Debtor 1 | Devin | | Griffin | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | w \ | | | |
| (Spouse, if f | iling) First Name | Middle Name | Last Name | |
| United State | es Bankruptcy Court for the: | Northern | District of Illinois | |
| Case numbe | ~ | | (State) | |
| (If known) | ਰ। | | | |
| | | | | Check if this is an |
| | | | | amended filing |
| Officia | I Form 106H | | | |
| Schod | ule H: Your C | adabtars | | 40/45 |
| Scried | ule n. Toul C | odebiois | | 12/15 |
| Ye 2. Within Idaho, L | the last 8 years, have you couisiana, Nevada, New Mexo. Go to line 3. es. Did your spouse, former so | lived in a community propinico, Puerto Rico, Texas, Waspouse, or legal equivalent liv | shington, and Wisconsin.) we with you at the time? | debtor.) mmunity property states and territories include Arizona, California, the name and current address of that person. |
| | Name of your spouse, | former spouse, or legal equiv | valent | |
| | Number Street | | | _ |
| | City | State | Zip Code | _ |
| again a | s a codebtor only if that p | erson is a guarantor or co | osigner. Make sure you hav | our spouse is filing with you. List the person shown in line 2 re listed the creditor on Schedule D (Official Form 106D), rele D, Schedule E/F, or Schedule G to fill out Column 2. |
| Columi | n 1: Your codebtor | | | Column 2: The creditor to whom you owe the debt |

Check all schedules that apply:

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| Fill in this information to ident | ify your case: | | | | | |
|---|--|---------------------|---------------------|--------------------|--|--------------------|
| Debtor 1 Devin | | Griffin | | | | |
| First Name | Middle Name | Last Na | me | | Check if this is: | |
| Debtor 2 (Spouse, if filing) First Name | Middle Name | Last Na | mo | | An amended filing | |
| (Spanes, a mana) Filst Name | iviluale marrie | Lastiva | IIIE | | _ | notition chapter 1 |
| United States Bankruptcy Court for the | : Northern | District of Illin | | | A supplement showing post- expenses as of the following | |
| Case number | | (Sta | ale) | | | |
| (If known) | | | | | MM / DD / YYYY | |
| Official Form 106I | | | | | | |
| | | | | | | |
| Schedule I: Your In | come | | | | | 12/1 |
| with you, include information include information about you additional pages, write your part 1: Describe Employm | our spouse. If more spa name and case numbe | ace is needed | d, attach a se | parate she | et to this form. On the t | |
| | | | | | | |
| Fill in your employment | | Debtor 1 | | | Debtor 2 | |
| information. | Employment status | Employe | d | | Employed | |
| If you have more than one job, | | ✓ Not Emp | | | Not Employed | |
| attach a separate page with | n | | ., | | | |
| information about additiona employers. | d Occupation | | | | - | |
| | Employer's name | | | | | |
| Include part time, seasonal or | ' Employer's address | Number Street | | | Number Street | |
| self-employed work. | | Number Street | L | | Number Street | |
| Occupation may include | | | | | - | |
| student or homemaker, if it applies. | | | | | | |
| or nornanar, ir it applies. | | City | State | Zip Code | City State | Zip Code |
| | | 5, | | _p | 2.0, | _p |
| | How long employed | | | | | |
| | there? | | | | | |
| Part 2: Give Details Abou | t Monthly Income | | | | | |
| | • | | | | | |
| Estimate monthly income as of th you are separated. | e date you file this form. If y | ou have nothing t | o report for any li | ne, write \$0 in t | he space. Include your non-filing | spouse unless |
| If you or your non-filing spouse have r attach a separate sheet to this form. | more than one employer, comb | ine the information | n for all employer | s for that persor | n on the lines below. If you need | more space, |
| auau i a separate sneet to this form. | | | For De | btor 1 | For Debtor 2 or | |
| | | | | | non-filing spouse | |
| List monthly gross wages, saideductions.) If not paid monthly, | | | 2. | \$0.00 | non-filing spouse | |
| | calculate what the monthly wag | ge would be. | | \$0.00 + \$0.00 | non-filing spouse | |

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| Debtor 1 | | NO. III. NO. | Griffin | Case number | (if known) | |
|------------------------|---|---|--------------------------|--------------------------|------------------------------------|-------------------------|
| | First Name | Middle Name | Last Name | For Debtor 1 | For Debtor 2 or non-filing spouse | |
| Copy → | line 4 here | | 4. | \$0.00 | | |
| 5. List al | ll payroll dedu | uctions: | | | | |
| 5a. T a | ax, Medicare, | and Social Security deductions | 5a. | \$0.00 | | |
| 5b. M | landatory cor | ntributions for retirement plans | 5b. | \$0.00 | | |
| | | ributions for retirement plans | 5c. | \$0.00 | | |
| | - | ments of retirement fund loans | 5d. | \$0.00 | | |
| | surance | , | 5e. | \$0.00 | | |
| - | | ort obligations | 5f. | \$0.00 | | |
| | Inion dues | or oxiigatione | 5g. | \$0.00 | | |
| Ū | | ons. Specify: | • | | <u></u> | |
| | | Suctions. Add lines 5a + 5b + 5c + 5d + 5e | | | <u> </u> | |
| +5h. | ne payron ded | auctions. Add lines ba + bb + bb + bb + be | +5f + 5g 6. | \$0.00 | | |
| 7. Calcu | late total mor | hthly take-home pay. Subtract line 6 from li | ne 4. 7. | \$0.00 | | |
| 8. List al | II other incom | e regularly received: | | | | |
| b | usiness, prof | m rental property and from operating a ession, or farm | | | | |
| re | | ent for each property and business showing y and necessary business expenses, and the me. | | \$0.00 | | |
| | terest and di | | 8b. | \$0.00 | | |
| 8c. F a | | payments that you, a non-filing spouse | | | | |
| In | clude alimony, | spousal support, child support, maintenance nt, and property settlement. | e, 8c. | \$0.00 | | |
| 8d. U | nemploymen | t compensation | 8d. | \$0.00 | | |
| 8e. S e | ocial Security | | 8e. | \$0.00 | | |
| Inc as the su | clude cash ass sistance that y e Supplementa bsidies | ent assistance that you regularly receive stance and the value (if known) of any non-coureceive, such as food stamps (benefits unal Nutrition Assistance Program) or housing | ash | | | |
| | , | ssistance Programs Income | 8f. | <u>\$190.00</u> | | |
| 8g. P | ension or ret | rement income | 8g. | \$0.00 | | |
| 8h. O | ther monthly | income. Specify: Uber Driver | 8h. + | \$200.00 + | · | |
| 9. Add a | II other incon | ne Add lines 8a + 8b + 8c + 8d + 8e + 8f +8 | g + 8h. 9. | \$390.00 | | |
| | | income. Add line 7 + line 9. ne 10 for Debtor 1 and Debtor 2 or non-filing | 10. spouse | \$390.00 | = | \$390.00 |
| Includ relativ | de contributions ves. | ular contributions to the expenses that so from an unmarried partner, members of you amounts already included in lines 2-10 or amounts | ur household, your de | pendents, your roommates | | |
| Speci | | | ca. no trat are riot ava | | ed in <i>Scriedale 5.</i> 11. + | \$0.00 |
| <u> </u> | ııy. | | | | | Ψ0.00 |
| | | n the last column of line 10 to the amount the Summary of Schedules and Statistical S | | | | \$390.00 |
| | | | | | | Combined monthly income |
| | ou expect an No. | increase or decrease within the year afte | r you file this form? | | | |
| | Yes. Explain: | | | | | |

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| Fill in this inform | nation to identify y | our case: | | | | |
|-----------------------------|--|---|---|--------------------------|--------------------------------|-------|
| Debtor 1 | Devin | | Griffin | | | |
| Debior i | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | Check if this is: | | |
| (Spouse, if filing | First Name | Middle Name | Last Name | An amended filing | | |
| United States B | sankruptcy Court fo | or the: Northern | District of Illinois (State) | A supplement sho | owing post-petition chapter 13 | |
| Case number | | | (State) | expenses as or the | Fioliowing date. | |
| (If known) | | | | MM / DD / YYYY | | |
| Official I | Form 106 | 3 I | | | | |
| | | | | | | |
| Schedul | e J: You | r Expenses | | | | 12/15 |
| | | s possible. If two married people are | | | | |
| | more space is ne wer every questi | eeded, attach another sheet to this on. | form. On the top of any addition | al pages, write your nar | ne and case number | |
| | cribe Your Ho | | | | | |
| 1. Is this a join | | usenoiu | | | | |
| | | | | | | |
| | to line 2 | | | | | |
| Yes. Do | oes Debtor 2 live | in a separate household? | | | | |
| | No | | | | | |
| | Yes. Debtor 2 r | must file Official Forms 106J-2, Expen | ses for Separate Household of Deb | tor 2. | | |
| 2. Do you hav | е | ✓ No | | | | |
| dependents? | | _ | | | | |
| Do not list Do Debtor 2. | ebtor 1 and | Yes. Fill out this information for each dependent | Dependent's relationship to Debtor 1 or Debtor 2 | Dependent's age | Does dependent live with you? | |
| | enses include f people other | ✓ No | | | | |
| than | d varir | Yes | | | | |
| yourself and dependents | | _ | | | | |
| | | | | | | |
| Part 2: Estir | nate Your Ong | going Monthly Expenses | | | | |
| | of a date after the | your bankruptcy filing date unless to bankruptcy is filed. If this is a sup | | | | |
| | • | n non-cash government assistance | • | | Your expenses | |
| | | uded it on Schedule I: Your Income | , | | Tour expenses | |
| | or home owners r the ground or lot. | hip expenses for your residence. In . 4. | clude first mortgage payments and | | \$20 | 0.00 |
| | uded in line 4: | | | | | |
| 4a. Real es | state taxes | | | | 4a \$ | 0.00 |
| 4b. Proper | ty, homeowner's, o | or renter's insurance | | | 4b. \$0 | 0.00 |
| 4c. Home r | maintenance, repai | ir, and upkeep expenses | | | 4c. \$0 | 0.00 |
| 4d. Homeo | wner's association | n or condominium dues | | | 4d. \$ 0 | 0.00 |

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Griffin

Debtor 1

Devin Case number (if known) First Name Middle Name Last Name Your expenses 5. Additional mortgage payments for your residence, such as home equity loans \$0.00 5. 6. Utilities: 6a. Electricity, heat, natural gas \$20.00 6a. 6b. Water, sewer, garbage collection \$0.00 6b. 6c. Telephone, cell phone, Internet, satellite, and cable services \$0.00 6c. 6d. Other. Specify: \$0.00 6d 7. Food and housekeeping supplies \$300.00 7. 8. Childcare and children's education costs \$0.00 8. 9. Clothing, laundry, and dry cleaning 9. \$25.00 10. Personal care products and services \$30.00 10. 11. Medical and dental expenses \$0.00 11. 12. Transportation. Include gas, maintenance, bus or train fare. \$0.00 12. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 13. 14. Charitable contributions and religious donations \$0.00 14. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance \$0.00 15a 15b. Health insurance \$0.00 15b 15c. Vehicle insurance 15c \$0.00 15d. Other insurance. Specify: ___ 15d \$0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: \$0.00 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a \$0.00 17b. Car payments for Vehicle 2 17b \$0.00 17c. Other. Specify: \$0.00 17c 17d. Other. Specify: \$0.00 17d 18. Your payments of alimony, maintenance, and support that you did not report as deducted from \$0.00 your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: \$0.00 19. 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property \$0.00 20a 20b. Real estate taxes. \$0.00 20h 20c. Property, homeowner's, or renter's insurance \$0.00 20c 20d. Maintenance, repair, and upkeep expenses. \$0.00 20d 20e. Homeowner's association or condominium dues \$0.00 20e

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| Debtor 1 | Devin | | Griffin | Case number (if known) | | |
|-------------------|----------------------------|------------------------------------|------------------------------|------------------------|-----|----------|
| | First Name | Middle Name | Last Name | | | |
| 21.Other | . Specify: | | | | 21 | \$0.00 |
| | | | | | | |
| | ılate your monthly ex | penses. | | | | \$395.00 |
| 22a. <i>A</i> | add lines 4 through 21. | | | | | \$0.00 |
| 22b. C | Copy line 22 (monthly e | xpenses for Debtor 2), if any, fro | m Official Form 106J-2 | | | \$395.00 |
| 22c. A | dd line 22a and 22b. Tl | he result is your monthly expens | ses. | | 22. | |
| 23.Calcu | late your monthly ne | t income. | | | | |
| 23a. C | Copy line 12 (your comb | pined monthly income) from Sch | edule I. | | 23a | \$390.00 |
| 23b. C | Copy your monthly expe | nses from line 22 above. | | | 23b | \$395.00 |
| 23c. S | Subtract your monthly ex | cpenses from your monthly incor | ne. | | | (\$5.00) |
| | The result is your mont | hly net income. | | | 23c | |
| 24. Do y o | ou expect an increase | e or decrease in your expense | es within the year after yo | u file this form? | | |
| Fore | · example do vou expect | to finish paying for your car loar | within the year or do you ex | rnect vour | | |
| | | ase or decrease because of a m | | | | |
| ✓ 1 | No | | | | | |
| | ⁄es | | | | | |
| | Explain here: | | | | | |
| | Explain nere. | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

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| Fill in this information to identify your case: | | | | | |
|---|---------------------------|-------------|----------------------|--|--|
| Debtor 1 | Devin | | Griffin | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse, if filing) First Name | | Middle Name | Last Name | | |
| United States B | Bankruptcy Court for the: | Northern | District of Illinois | | |
| (State) | | | | | |
| Case number (If known) | | | | | |

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | t1: Sign Below | |
|-----|--|---|
| | Did you pay or agree to pay someone who is NOT an attorney to h | nelp you fill out bankruptcy forms? |
| | ☑ No | |
| | Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| | | |
| | | |
| | Under penalty of perjury, I declare that I have read the summary a that they are true and correct. | nd schedules filed with this declaration and |
| | · | . |
| X | | X |
| | Signature of Debtor 1 | Signature of Debtor 2 |
| | Date 9/30/2016 | Date |
| | MM/DD/YYYY | MM/DD/YYYY |

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| Fill in | this info | rmation to identify your ca | se: | | | | | |
|-----------------------|---|--|---|--|------------------------------------|----------------|-------------------|------------------------------------|
| Debto | or 1 | Devin | | Griffin | | | | |
| Debie | , , | First Name | Middle N | | ne | _ | | |
| Debto (Spou | | ng) First Name | Middle N | Name Last Nar | ne | - | | |
| | | Bankruptcy Court for the: | Northern | District of Illino | | | | |
| | | | | (Sta | ite) | _ | | |
| Case (If kno | number wn) | | | | | - | | |
| | | Form 107 | | | | | | Check if this is an amended filing |
| Be as on space questi | comple is need on. | te and accurate as poss ed, attach a separate sh | ible. If two married eet to this form. O | n the top of any addition | er, both are ed al pages, write | ually responsi | ble for supplying | correct information. If more |
| Part 1 1. | | | | | | | | |
| | | Married ✓ Not married | | | | | | |
| 2. | During the last 3 years, have you lived anywhere other than where you live now? | | | | | | | |
| | Ye | No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. | | | | | | |
| | De | Number Street | | Dates Debtor 1 lived there | Debtor 2: | | | Dates Debtor 2 lived there |
| | | | | | Same as Debtor 1 Number Street | | | Same as Debtor 1 |
| | Nu | | | From | | | | From |
| | _ | | | To | | | | To |
| | Ci | ty State | Zip Code | | City | State | Zip Code | |
| | | | | | Same a | as Debtor 1 | | Same as Debtor 1 |
| | Nu | Number Street | | From Number | | per Street | | From |
| | | | | To | | | | To |
| | Ci | ty State | Zip Code | | City | State | Zip Code | |
| | | | | ouse or legal equivalent i Nevada, New Mexico, Pu | | | | nmunity property states and |
| · | No | | | | | | | |

Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

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| Deb | tor 1 | | Griffin | | umber (if known) | |
|------|----------------------|---|--|---|--|--|
| | | | Name Last Na | ame | | |
| Part | 2: | Explain the Sources of Your | Income | | | |
| | Fill i | you have any income from employm in the total amount of income you receive vities. If you are filing a joint case and you No Yes. Fill in the details. | ed from all jobs and all busin | esses, including part-time | | ears? |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | | rom January 1 of current year until ne date you filed for bankruptcy: | Wages, commissions, bonuses, tips Operating a business | \$3828.63 | Wages, commissions, bonuses, tips Operating a business | |
| | | for last calendar year: January 1 to December 31, 2015 | Wages, commissions, bonuses, tips Operating a business | \$1500.00 | Wages, commissions, bonuses, tips Operating a business | |
| | | or the calendar year before that: January 1 to December 31, 2014 | Wages, commissions, bonuses, tips Operating a business | \$30000.00 | Wages, commissions, bonuses, tips Operating a business | |
| | nclu bene case | you receive any other income during ide income regardless of whether that incefit payments; pensions; rental income; in and you have income that you received each source and the gross income from No Yes. Fill in the details. | come is taxable. Examples or nterest; dividends; money col together, list it only once under | f other income are alimony; ch llected from lawsuits; royalties; er Debtor 1. | ; and gambling and lottery wini | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) |
| | | From January 1 of current year until he date you filed for bankruptcy: | Est. YTD LINK | \$1,710.00 | | |
| | | For last calendar year: January 1 to December 31, 2015) YYYY | Est. 2015 LINK | \$2,280.00 | | |
| | | For the calendar year before that: January 1 to December 31, 2014 YYYYY | | \$0.00 | | |
| | | | | | | |

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| | st Name | | Middle Name | Last Name | | | | |
|---|---|---------------------|---|---|--|---------------------------------|--|--|
| l ic | | Daymon | | Before You Filed for | Rankruntov | | | |
| Lis | ot Certain | rayilleli | ts Tou Made E | Selote Tou Filed for | Ванкгирісу | | | |
| e eithe | er Debtor 1 | 's or Debto | or 2's debts prima | arily consumer debts? | | | | |
| No. | | | Debtor 2 has pri I, family, or househ | | Consumer debts are defined | d in 11 U.S.C. § 101(8) as "inc | urred by an individual | |
| | During the | 90 days befo | ore you filed for ba | nkruptcy, did you pay any c | reditor a total of \$6,425* or m | ore? | | |
| | No. Go | to line 7. | | | | | | |
| Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. | | | | | | | | |
| | * Subject to | adjustment | on 4/01/19 and ev | very 3 years after that for ca | ses filed on or after the date | of adjustment. | | |
| Yes. | Debtor 1 o | r Debtor 2 | or both have pri | marily consumer debts. | | | | |
| - | | | _ | - | reditor a total of \$600 or more | <u> </u> | | |
| | _ | | o.o you mou for but | spio,, and you pay arry o | . caor a total of quoto of Hiore | . . | | |
| | | to line 7. | | ., | | | | |
| | t | hat creditor. | . Do not include pa | ayments for domestic supp ayments to an attorney for t | or more and the total amount ort obligations, such as child his bankruptcy case. | support and | | |
| | | | | Dates of payment | Total amount paid | Amount you still owe | Was this payment | |
| | | | | | | | for | |
| Cre | ditor's Name | e | | | | | Mortgage | |
| | | e | | | | | Mortgage Car | |
| | editor's Name | e | | | | | Mortgage Car Credit card | |
| | | e | | | | | Mortgage Car | |
| | mber Street | e State | Zip Code | | | | Mortgage Car Credit card Loan repayme | |
| Nun | mber Street | State | Zip Code | | | | Mortgage Car Credit card Loan repayme Suppliers or vendors Other Mortgage | |
| City | nber Street | State | Zip Code | | | | Mortgage Car Credit card Loan repayme Suppliers or vendors Other Mortgage Car | |
| City | mber Street | State | Zip Code | | | | Mortgage Car Credit card Loan repayme Suppliers or vendors Other Mortgage Car Credit card | |
| City | nber Street | State | Zip Code | | | | Mortgage Car Credit card Loan repayme Suppliers or vendors Other Mortgage Car | |
| City | nber Street | State | Zip Code Zip Code | | | | Mortgage Car Credit card Loan repayme Suppliers or vendors Other Mortgage Car Credit card Loan repayme Suppliers or vendors | |
| City | nber Street | State e | | | | | Mortgage Car Credit card Loan repayme Suppliers or vendors Other Mortgage Car Credit card Loan repayme Suppliers or vendors Other Other | |
| City | nber Street | State e State | | | | | Mortgage Car Credit card Loan repayme Suppliers or vendors Other Mortgage Car Credit card Loan repayme Suppliers or vendors Other Suppliers or vendors Other Mortgage | |
| City Cree Nun City | nber Street ditor's Name | State e State | | | | | Mortgage Car Credit card Loan repayme Suppliers or vendors Other Mortgage Car Credit card Loan repayme Suppliers or vendors Other Other | |
| City Cree Nun City | nber Street ditor's Name | State e State | | | | | Mortgage Car Credit card Loan repayme Suppliers or vendors Other Mortgage Car Credit card Loan repayme Suppliers or vendors Other Mortgage Car Credit card Loan repayme Mortgage Car Credit card Loan repayme Car Credit card | |
| City Cree Nun City | nber Street ditor's Name nber Street ditor's Name | State e State | | | | | Mortgage Car Credit card Loan repayme Suppliers or vendors Other Mortgage Car Credit card Loan repayme Suppliers or vendors Other Mortgage Car Credit card Loan repayme Mortgage Car Credit card Cother Mortgage Car Credit card | |

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| Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. Dates of payment Amount you still owe Insider's Name Number Street City State Zip Code City State Zip Code | Debtor 1 | | | Grif | | Case number (ii | f known) |
|--|-----------------------|---|--|--|---|---|---|
| Insider's Name Number Street City State Zip Code | | First Name | Middle Name | Last | Name | | |
| Yes. List all payments to an insider. | Insid corp ager | ders include your relatives; any porations of which you are an c nt, including one for a business | general partners; officer, director, per syou operate as a | relatives of any g son in control, or | eneral partners; part owner of 20% or mo | tnerships of which your of their voting sec | ou are a general partner; curities; and any managing |
| Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. No Yes. List all payments that benefited an insider. Dates of payment Paid Total amount pou still owe Insider's Name Number Street City State Zip Code Insider's Name Number Street Number Street Number Street | | | sider. | | | | |
| Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or costgned by an insider. No Yes. List all payments that benefited an insider. Dates of payment paid Still owe Reason for this payment Include creditor's name Insider's Name Number Street City State Zip Code | | | | | | | Reason for this payment |
| City State Zip Code Insider's Name Number Street | | Insider's Name | | | | | |
| Insider's Name Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. No Yes. List all payments that benefited an insider. Dates of payment Paid Amount you still owe Insider Street Insider's Name Number Street City State Zip Code | | Number Street | | | | | |
| Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. ✓ No Yes. List all payments that benefited an insider. Dates of payment paid Amount you still owe Include creditor's name Insider's Name Number Street City State Zip Code Insider's Name Number Street | _ | City State | Zip Code | | | | |
| City State Zip Code | | Insider's Name | | | | | |
| Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. No Yes. List all payments that benefited an insider. Dates of payment Dates of payment Dates of payment Total amount paid Amount you still owe Insider's Name Number Street City State Zip Code Insider's Name Number Street | | Number Street | | | | | |
| Include payments on debts guaranteed or cosigned by an insider. No Yes. List all payments that benefited an insider. Dates of payment paid Total amount paid Amount you still owe Include creditor's name City State Zip Code Insider's Name Number Street Number Street | | City State | Zip Code | | | | |
| Dates of payment paid Total amount paid Reason for this payment Include creditor's name Insider's Name Number Street City State Zip Code Insider's Name Number Street | insid Inclu | der? de payments on debts guarant No | teed or cosigned by | | payments or trans | fer any property oi | n account of a debt that benefited an |
| Insider's Name Number Street City State Zip Code Insider's Name Number Street | | | | | | | |
| Number Street City State Zip Code Insider's Name Number Street | | | | | | | Include creditor's name |
| City State Zip Code Insider's Name Number Street | | Insider's Name | | | | | |
| Insider's Name Number Street | | Number Street | | | | | |
| Number Street | _ | City State | Zip Code | | | | |
| | | Insider's Name | | | | | |
| City State Zip Code | | Number Street | | | | | |
| | | City State | Zip Code | | | | |

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| ebtor 1 | | | Griffin | | Case number (if | known) | |
|----------------|------------------------------|------------------------|---------------------------------|--------------------------------|-----------------|----------|-------------------------------------|
| | First Name | Middle Name | Last Name | | | | |
| ırt 4: | Identify Legal Action | ns, Repossessions | s, and Foreclosure | es | | | |
| With List a | nin 1 year before you filed | for bankruptcy, were y | ou a party in any laws | uit, court actio | | | ng? r custody modifications, and |
| _ | No | | | | | | |
| = | Yes. Fill in the details. | | | | | | |
| _ | | Natu | ire of the case | Court or | agency | | Status of the case |
| | Case title | | | | | | |
| | | | | Court Nan | ne | | Pending |
| | Case number | | | | | | On appeal Concluded |
| | | | | NumberSt | reet | | Concluded |
| | | | | City | State | Zip Code | |
| | Case title | | | | | · | Pending |
| | | | | Court Nan | ne | | On appeal |
| | Case number | | | NumberSt | reet | | Concluded |
| | | | | | | | |
| | | | | City | State | Zip Code | |
| | Yes. Fill in the information | below. | Describe the prop | erty | | Date | Value of the |
| | | | | | | | property |
| | Creditor's Name | | | | | | |
| | | | Explain what happ | Explain what happened | | | |
| | Number Street | | _ | | | | |
| | | | Property was re | • | | | |
| | | | Property was fo | | | | |
| | City State | Zip Code | Property was a | jarnished. ttached, seized, | or levied | | |
| | State State | 2.19 0000 | Describe the prop | | or icvicu. | Date | Value of the |
| | | | | | | | property |
| | Creditor's Name | | | | | | |
| | | | Explain what happ | pened | | | |
| | Number Street | | | | | | |
| | | | Property was re | | | | |
| | | | Property was for Property was g | | | | |
| | City State | Zin Code | | jamisneu. ttached seized | or levied | | |

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| Debto | r 1 | Devin | Griffin | Case number (if known) | |
|--------|----------|---|--------------------------------|---|------------------------|
| | | First Name Middle Name | Last Name | | |
| | | hin 90 days before you filed for bankruptcy, did ounts or refuse to make a payment because yo | | nk or financial institution, set off any am | ounts from your |
| [| ✓ | No Yes. Fill in the details. | | | |
| | | | Describe the action the | creditor took Date action was taken | n Amount |
| | | Creditor's Name | - | | |
| | | Number Street | _ Last 4 digits of account nu | ımber: XXXX- | |
| | | City State Zip Code | _ | | |
| | | hin 1 year before you filed for bankruptcy, was ointed receiver, a custodian, or another officia | | ossession of an assignee for the benefit | of creditors, a court- |
| [| ✓ | No Yes | | | |
| Part 5 | : | List Certain Gifts and Contributions | | | |
| 13. | Wi | thin 2 years before you filed for bankruptcy, di | d you give any gifts with a to | tal value of more than \$600 per person? | |
| | | No Yes. Fill in the details for each gift. | | | |
| | | Gifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave the gifts | Value |
| | | Person to Whom You Gave the Gift | _ | | - |
| | | Number Street | _ | | |
| | | City State Zip Code Person's relationship to you | _ | | |
| | | Person to Whom You Gave the Gift | - | | |
| | | Number Street | _ | | |
| | | City State Zip Code Person's relationship to you | _ | | |

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| Debt | | Devin | | Griffin | Case number (if known) | |
|------|----------|---|--------------------------|-----------------------------------|-------------------------------------|-----------------------------|
| | | First Name | Middle Name | Last Name | | |
| 14. | Witl | nin 2 years before you filed | l for bankruptcy, did y | ou give any gifts or contribution | ons with a total value of more than | \$600 to any charity? |
| | V | No | | | | |
| | Ħ | Yes. Fill in the details for each | ch gift or contribution. | | | |
| | | Gifts or contributions to | _ | Describe what you contrib | uted Date you | Value |
| | | that total more than \$600 | | | contribu | |
| | | | | | | |
| | | Charity's Name | | | | |
| | | | | | | |
| | | | | | | |
| | | Number Street | _ | | | |
| | | City State | 7in Codo | | | |
| | | City State | Zip Code | | | |
| Part | 6: | List Certain Losses | | | | |
| 15. | | nin 1 year before you filed follong? | or bankruptcy or sinc | ce you filed for bankruptcy, did | you lose anything because of thef | t, fire, other disaster, or |
| | | No | | | | |
| | Ħ | Yes. Fill in the details. | | | | |
| | _ | Describe the property you | ı lost and | Describe any insurance co | verage for the loss Date of y | your Value of property |
| | | how the loss occurred | | Include the amount that insura | ance has paid. List loss | lost |
| | | | | pending insurance claims on | line 33 of Schedule | |
| | | | | A/B: Property. | | |
| | | | | | | <u> </u> |
| Part | 7: | List Certain Payments | or Transfers | | | |
| | Inclu | at seeking bankruptcy or p de any attorneys, bankruptcy No Yes. Fill in the details. | | | or transf | er payment |
| | | Dryor Chris | | Attornovia Foo. 0.00 | was mad | |
| | | Pryor, Chris Person Who Was Paid | | Attorney's Fee - 0.00 | 9/30/2016 | |
| | | | | | | |
| | | Number Street | | | | |
| | | | | | | |
| | | | | | | |
| | | City State | Zip Code | | | |
| | | Email or website address None | | | | |
| | | Person Who Made the Paym | nent, if Not You | | | |
| | | | | | | <u> </u> |
| | | Person Who Was Paid | | | | |
| | | Number Street | | | | |
| | | · · · · · · · · · · · · · · · · · · · | | | | |
| | | | | | | |
| | | City State | Zip Code | | | |
| | | City State Email or website address | Zip Code | | | |

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| Deb | tor 1 | Devin | | Griffin | Case number (if known) | | |
|-----|-------|---|------------------------|---|--------------------------------|-----------------------|------------------------------|
| | | First Name | Middle Name | Last Name | | | |
| 17. | help | hin 1 year before you filed by you deal with your credito not include any payment or tra No Yes. Fill in the details. | ors or to make payment | s to your creditors? | our behalf pay or transfer a | any property to anyo | ne who promised to |
| | ш | res. I ili ili trie details. | | | | | |
| | | | | Description and value of transferred | f any property | | mount of ayment |
| | | Person Who Was Paid | | | | | |
| | | Number Street | | | | | |
| | | City State | Zip Code | | | | |
| | | City State | Zip Code | | | | |
| | | ude both outright transfers an sfers that you have already lis No Yes. Fill in the details. | | | a security interest or mortgag | | |
| | | | | Description and value or property transferred | | ceived or debts paid | Date transfer was made |
| | | Person Who Received Trans | nsfer | | | | |
| | | Number Street | | | | | |
| | | City State Person's relationship to you | Zip Code | | | | |
| | | Person Who Received Tran | nsfer | | | | |
| | | Number Street | | | | | |
| | | City State Person's relationship to you | Zip Code | | | | |
| 19. | | hin 10 years before you file ese are often called asset-pro | | ou transfer any property to | a self-settled trust or simil | ar device of which yo | ou are a beneficiary? |
| | V | No Yes. Fill in the details. | | | | | |
| | Ц | ies. Fiii iii uie detalis. | | Description and value | of the property transferred | | Date transfer was made |
| | | Name of trust | | | | | |

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| Debtor ' | 1 Devin First Name Middle Name | Griffin Last Name | Case number (if known) | |
|--------------------|--|--|---|--|
| Part 8: | | | was and Starage Units | |
| 20. W mo | Vithin 1 year before you filed for bankruptcy, were loved, or transferred? clude checking, savings, money market, or other final | e any financial accounts or instr | ruments held in your name, or for your benefit, o | |
| ∞ ✓ | poperatives, associations, and other financial instituti No Yes. Fill in the details. | ons. | | |
| | - | Last 4 digits of account number | Type of account or instrument account was closed, sold, moved, or transferred | Last balance before closing or transfer |
| | Person Who Was Paid | XXXX- | Checking Savings | |
| | Number Street | | ☐ Money market ☐ Brokerage ☐ Other | |
| | City State Zip Code | VVVV | Charling | |
| | Person Who Was Paid | XXXX- | Checking Savings | |
| | Number Street | | ☐ Money market ☐ Brokerage | |
| | City State Zip Code | | Other | |
| | o you now have, or did you have within 1 year b ther valuables? No Yes. Fill in the details. | efore you filed for bankruptcy, and the second seco | Describe the contents | Do you still have it? |
| | Name of Financial Institution | Name | | ☐ No ☐ Yes |
| | Number Street | Number Street | | |
| | City State Zip Code | City State Zip | Code | |
| 22. Ha | ave you stored property in a storage unit or place | ce other than your home within 1 | 1 year before you filed for bankruptcy? | 1 |
| <u> </u> | No Yes. Fill in the details. | | | |
| | | Who else had access to it? | Describe the contents | Do you still have it? |
| | Name of Storage Facility | Name | | ☐ No ☐ Yes |
| | Number Street | Number Street | | |
| | City State Zip Code | City State Zip | Code | |

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| rt 9: | First Name Middle Name | | | | |
|----------|--|--|---------------------------|---|----------------|
| τ9: | Identify Dramarty Vay Hald or Cam | Last Name | - | | |
| | Identify Property You Hold or Con | trol for Someone | Else | | |
| Do | you hold or control any property that some | eone else owns? Inclu | de any property you b | orrowed from, are storing for, or hold i | n trust for |
| SO | meone. | | | | |
| ✓ | No | | | | |
| | Yes. Fill in the details. | | | | |
| | | Where is the prop | erty? | Describe the contents | Value |
| | · | - | | | |
| | Owner's Name | Number Street | | | |
| | Number Street | | | | |
| | | _ | | | |
| | | City Sta | ate Zip Code | | |
| | City State Zip Code | _ | | | |
| | Cive Details About Environments | al luda umantia u | | | |
| t 10: | Give Details About Environmenta | information | | | |
| r the | purpose of Part 10, the following definitions app | oly: | | | |
| - / | Environmental law means any federal, state, or | local statute or regulation | n concerning pollution, o | contamination, releases of | |
| | nazardous or toxic substances, wastes, or mate | | | | |
| | including statutes or regulations controlling the | cleanup of these substar | nces, wastes, or materia | āl. | |
| | Site means any location, facility, or property as d | • | mental law, whether you | now own, operate, or utilize it | |
| (| or used to own, operate, or utilize it, including d | ilsposai sites. | | | |
| | Hazardous material means anything an environi | | | ous substance, | |
| | toxic substance, hazardous material, pollutant, o | contaminant, or similar te | IIII. | | |
| port a | all notices, releases, and proceedings that you k | know about, regardless of | when they occurred. | | |
| | | | | | |
| на | s any governmental unit notified you that y | ou may be liable or por | | | |
| ✓ | | | tentially liable under d | or in violation of an environmental law? | |
| | No | | tentially liable under d | or in violation of an environmental law? | |
| | No Yes. Fill in the details. | | · | | |
| L | | Governmental un | · | or in violation of an environmental law? Environmental law, if you know it | Date of |
| | | Governmental un | · | | |
| | | Governmental unit | · | | Date of |
| L | Yes. Fill in the details. Name of site | Governmental unit | · | | Date of |
| | Yes. Fill in the details. | | · | | Date of |
| | Yes. Fill in the details. Name of site | Governmental unit | it | | Date of |
| | Yes. Fill in the details. Name of site Number Street | Governmental unit Number Street | it | | Date of |
| | Yes. Fill in the details. Name of site | Governmental unit Number Street | it | | Date of |
| На | Yes. Fill in the details. Name of site Number Street | Governmental unit Number Street City Sta | ate Zip Code | | Date of |
| Ha | Yes. Fill in the details. Name of site Number Street City State Zip Code ve you notified any governmental unit of an | Governmental unit Number Street City Sta | ate Zip Code | | Date of |
| Ha | Yes. Fill in the details. Name of site Number Street City State Zip Code | Governmental unit Number Street City Sta | ate Zip Code | | Date of |
| Ha | Name of site Number Street City State Zip Code ve you notified any governmental unit of an | Governmental unit Number Street City Sta | ate Zip Code s material? | Environmental law, if you know it | Date of |
| Ha | Name of site Number Street City State Zip Code ve you notified any governmental unit of an | Governmental unit Number Street City Sta | ate Zip Code s material? | | Date of notice |
| Ha ✓ | Name of site Number Street City State Zip Code ve you notified any governmental unit of all No Yes. Fill in the details. | Governmental unit Number Street City Sta | ate Zip Code s material? | Environmental law, if you know it | Date of notice |
| Ha | Name of site Number Street City State Zip Code ve you notified any governmental unit of an | Governmental unit Number Street City Sta | ate Zip Code s material? | Environmental law, if you know it | Date of notice |
| Ha | Name of site Number Street City State Zip Code ve you notified any governmental unit of all No Yes. Fill in the details. | Governmental unit Number Street City Sta | ate Zip Code s material? | Environmental law, if you know it | Date of notice |
| Ha 🗸 | Name of site Number Street City State Zip Code ve you notified any governmental unit of all No Yes. Fill in the details. | Governmental unit Number Street City State The present of the p | ate Zip Code s material? | Environmental law, if you know it | Date of notice |
| Ha | Name of site Number Street City State Zip Code ve you notified any governmental unit of all No Yes. Fill in the details. | Governmental unit Number Street City Sta | ate Zip Code s material? | Environmental law, if you know it | Date of notice |
| Ha | Name of site Number Street City State Zip Code ve you notified any governmental unit of all No Yes. Fill in the details. | Governmental unit Number Street City Sta | ate Zip Code s material? | Environmental law, if you know it | Date of notice |

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| Deb | tor 1 | Devin | | | Griffin | Case | e number (if known) | |
|------|----------|-------------------------|-------------------|------------------------|-------------------------------|--------------------|--|----------------|
| | | First Name | | Middle Name | Last Name | | | |
| 20 | Have | a vav baan a nami | . in any ivalia | ial au administra | tivo proceeding under | | al law 2 la alvida actilomento and arder | _ |
| 26. | пач | e you been a party | in any judici | ai or administra | live proceeding under | any environment | al law? Include settlements and order | S. |
| | ✓ | No | | | | | | |
| | П | Yes. Fill in the detail | ils. | | | | | |
| | | | | | Court or agency | | Nature of the case | Status of the |
| | | | | | | | | case |
| | | Case title | | | | | | _ |
| | | - | | | | | | Pending |
| | | | | (| Court Name | | | On appeal |
| | | Casa number | | | Number Street | | | Оптарреал |
| | | Case number | | ' | turnber ou eet | | | Concluded |
| | | | | 7 | City State | Zip Code | | |
| | | _ | | ` | only State | Zip Code | | |
| Part | :11: | Give Details A | bout Your | Business or | Connections to An | y Business | | |
| | | | | | | | | |
| 27. | Witl | hin 4 years before | you filed for | bankruptcy, did y | you own a business or | have any of the f | ollowing connections to any business | s? |
| | | | 16 | | | | | |
| | | | | - | rofession, or other activit | | r part-time | |
| | | A member of a | limited liability | y company (LLC) | or limited liability partners | ship (LLP) | | |
| | | A partner in a | partnership | | | | | |
| | | An officer, dire | ctor, or manag | ging executive of a | corporation | | | |
| | | An owner of at | least 5% of th | e voting or equity | securities of a corporatio | n | | |
| | | | | | | | | |
| | 띹 | No. None of the abo | | | | | | |
| | Ш | Yes. Check all that a | apply above ar | nd fill in the details | below for each business | | | |
| | | | | | Describe the natu | re of the busines | • • | |
| | | | | | | | include Social Security no | umber or ITIN. |
| | | | | | _ | | EIN: | |
| | | Business Name | | | | | | |
| | | | | | _ | | Dates business existed | |
| | | Number Street | | | Name of account | ant or bookkeens | | |
| | | | | | _ | unit of bookingope | | |
| | | City | State | Zip Code | | | From To | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | Describe the natu | ire of the husines | ss Employer Identification n | umber Do not |
| | | | | | Describe the nate | ire or the busines | include Social Security n | |
| | | | | | | | | |
| | | Business Name | | | - | | EIN: | |
| | | | | | | | | |
| | | Number Street | | | _ | | Dates business existed | |
| | | | | | Name of account | ant or bookkeepe | er | |
| | | City | State | Zip Code | _ | | From To | |
| | | Oity | Olaic | Zip Codc | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | Describe the natu | ire of the busines | | |
| | | | | | | | include Social Security no | umber or ITIN. |
| | | | | | _ | | EIN: | |
| | | Business Name | | | | | | |
| | | | | | _ | | D-41 | |
| | | Number Street | | | Name of accessor | ant or booklesses | Dates business existed | |
| | | | | | Name of account | ант ог рооккеере | | |
| | | City | State | Zip Code | | | From To | |
| | | - | | - | | | | |
| | | | | | | | | |
| | | | | | | | | |

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| Deb | tor 1 | Devin | | Griffin | Case number (if known) |
|------|------------|--|---------------------------|--|---|
| | | First Name | Middle Name | Last Name | |
| 28. | | nin 2 years before you file litors, or other parties. | d for bankruptcy, did you | give a financial statement | to anyone about your business? Include all financial institutions, |
| | ✓ | No Yes. Fill in the details below | <i>'</i> . | | |
| | | | | Date issued | |
| | | Name | | MM/DD/YYYY | |
| | | Number Street | | | |
| | | City State | e Zip Code | | |
| Part | 12- | Sign Below | | | |
| 1 | true a | and correct. I understand | that making a false state | ment, concealing property, prisonment for up to 20 ye | ts, and I declare under penalty of perjury that the answers are or obtaining money or property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | | /s/ Devin G | | | · |
| | | Signature of Do | eptor 1 | | Signature of Debtor 2 |
| | | Date 9/30/201 | 6 | | Date |
| ı | Did y | ou attach additional page | s to Your Statement of Fi | nancial Affairs for Individu | uals Filing for Bankruptcy (Official Form 107)? |
| ı | ✓ N | lo | | | |
| i | Y | es es | | | |
| ı | Did y | ou pay or agree to pay so | meone who is not an atto | rney to help you fill out ba | nkruptcy forms? |
| | ✓ N | lo | | | |
| İ | ☐ Y | es. Name of person | | | Attach the Bankruptcy Petition Preparer's Notice, |

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| Fill in this information to identify your case: | | | | | | | |
|---|---------------------------|-------------|----------------------|--|--|--|--|
| Debtor 1 | Devin | | Griffin | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | | | | | | | |
| (Spouse, if filin | g) First Name | Middle Name | Last Name | | | | |
| United States B | Bankruptcy Court for the: | Northern | District of Illinois | | | | |
| Case number (If known) | | | (State) | | | | |

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

List Your Creditors Who Have Secured Claims For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. Identify the creditor and the property that is collateral What do you intend to do with the property that Did you claim the property as exempt on Schedule C? secures a debt? Surrender the property. No. Creditor's name: Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: No. Surrender the property. Creditor's name: Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: Creditor's Surrender the property. No. name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: No. Creditor's Surrender the property. name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]:

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| Debto | r Devin | | Griffin | Case number (if |
|---------|---|-------------------------|---------------------------|---|
| 1 | First Name | Middle Name | Last Name | known) |
| iot Vo | ur Unavaired Dare | anal Dranarty Lagge | | Part 2: |
| | | onal Property Leases | Sahadula Ci Evacutari | Contracts and Unexpired Leases (Official Form 106G), fill in the |
| informa | ation below. Do not list | | leases are leases that ar | e still in effect; the lease period has not yet ended. You may assume |
| De | scribe your unexpired p | ersonal property leases | | Will the lease be assumed? |
| Les | ssor's name: | | | No Yes |
| | scription of leased perty: | | | |
| Les | ssor's name: | | | No Yes |
| | scription of leased perty: | | | |
| Les | ssor's name: | | | No Yes |
| | scription of leased perty: | | | |
| Les | ssor's name: | | | No Yes |
| | scription of leased perty: | | | |
| Les | ssor's name: | | | No Yes |
| | scription of leased perty: | | | |
| Les | ssor's name: | | | No Yes |
| | scription of leased perty: | | | |
| Les | ssor's name: | | | No Yes |
| | scription of leased perty: | | | |
| Part 3: | Sign Below | | | |
| | ler penalty of perjury, I descript that is subject to a | | ny intention about any pr | roperty of my estate that secures a debt and any personal |
| ¥ | /s/ Devin Griffin | | × | |
| _ | Signature of Debtor 1 | | | nature of Debtor 1 |
| | | | | |
| L | Date 9/30/2016 MM/DD/YYYY | | Dat | e |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | \$245 | filing fee |
|---|-------|--------------------|
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes:
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft:
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form — the Chapter 7 Means Test Calculation (Official Form 122A–2). The calculations on the form— sometimes called the Means Test —deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1,717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$275 | total fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$200 | filing fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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B 203 (12/94)

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re | Devin Griffin | Case | e No. | |
|-------|--|--|----------------------|-------------------------|
| _ | Debtor | | | (If known) |
| | | Chap | oter | Chapter 7 |
| | DISCLOSURE OF COMP | PENSATION OF ATTOR | NEY FOR D | EBTOR |
| 1. | Pursuant to 11 U.S.C. § 329(a) and Fed. Ban that compensation paid to me within one yea services rendered or to be rendered on beha is as follows: | r before the filing of the petition in ban | kruptcy, or agreed t | to be paid to me, for |
| | For legal services, I have agreed to accept | | | \$1,165.00 |
| | Prior to the filing of this statement I have rec | ceived | | \$0.00 |
| | Balance Due | | | \$1,165.00 |
| 2. | The source of the compensation paid to me v | vas: | | |
| | ✓ Debtor | Other (specify) | | |
| 3. | The source of the compensation paid to me is | s: | | |
| | Debtor | Other (specify) | | |
| 4. | I have not agreed to share the above-dis members and associates of my law firm | closed compensation with any other po | erson unless they a | re |
| | I have agreed to share the above-disclosmembers or associates of my law firm. At the people sharing in the compensation, | A copy of the agreement, together with | | |
| 5. | In return for the above-disclosed fee, I have a. Analysis of the debtor's financial situa bankruptcy; | | • | |
| | b. Preparation and filing of any petition, | schedules, statements of affairs and p | lan which may be r | equired; |
| | c. Representation of the debtor at the mo | eeting of creditors and confirmation he | aring, and any adjo | urned hearings thereof; |
| 6. | By agreement with the debtor(s), the above-o | disclosed fee does not include the follo | wing services: | |
| | | | | |
| | | CERTIFICATION | | |
| | I certify that the foregoing is a complete stater the debtor(s) in this bankruptcy proceedings. | ment of any agreement or arrangemen | t for payment to me | e for representation |
| | 9/30/2016 | /s/ Chris Pry | vor | |
| | Date | Signature of Att | orney | |
| | | Semrad Law I | -irm | |
| | | Name of law | firm | |

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Griffin, Devin | Case No | | | | | | |
|--------|---|--|---------------------------------------|-----|--|--|--|--|
| | Debtor(s) | | | | | | | |
| | | Chapter. | Chapter7 | | | | | |
| | VERIFICATION OF CREDITOR MATRIX | | | | | | | |
| | The above named Debtors hereby verify tha | t the attached list of creditors is true and | correct to the best of their knowledg | ge. | | | | |
| Date: | 9/30/2016 | /s/ Griffin, Devin | | | | | | |
| Jaic | 3/30/2010 | Griffin, Devin | | | | | | |
| | | Signature of Debtor | | | | | | |

PEOPLES E CU 200 East Randolph Chicago , IL 60601 USA

UNTD RCVY GR 11639 S 700 E SUITE 200 DRAPER , UT 84020 USA

PINNACLE LLC/RESURGENT 810 1ST ST S STE 260 HOPKINS , MN 55343 USA

ILLINOIS COLLECTION SE 8231 185TH ST STE 100 TINLEY PARK, IL 60487 USA

FIRST PREMIER BANK PO Box 7999 c/o Stephen Dirksen Saint Cloud , MN 56302 USA

CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. If further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also understand that The Semrad Law Firm, LLC may incur costs for such items as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$1,165.00 attorney fees plus any necessary postpetition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr.
Adding additional bills \$30.00
Motion to Reopen and Avoid Lien \$1000.00

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

- 1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments; or
- 2. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign

Devin I. Griffin Matter Number 16-00270

Initial: D.C.

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the second retainer. Further, if I do not wish for The Semrad Law Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

Date: 09/30/16

Attorne

Devin I. Griffin Matter Number 16-00270

Initial: D. G.

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| Debtor 1 Devin | | Griffin | Case number (if known) | |
|---|--|---|--|---|
| First Name | Middle Name | Last Name | | |
| Part 6: Answer These Q | uestions for Reporting P | | | |
| 16. What kind of debts do you have? 17. Are you filing under Chapter 7? | 16a. Are your debts pri 101(8) as "incurred No. Go to line 1 Yes. Go to line 1 16b. Are your debts pri | marily consumer debts by an individual primaril 6b. 17. marily business debts business or investment of 6c. 17. bts you owe that are no | y for a personal, fam ? Business debts are or through the operat | ily, or household purpose." debts that you incurred to ion of the business or |
| Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | paid that funds will be ☑ No. ☐ Yes. | oter 7. Do you estimate that afte e available to distribute to unse | er any exempt property is ex cured creditors? | coluded and administrative expenses are |
| 18. How many creditors do you estimate that you owe? | ✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999 | 1,000-5,00 5,001-10,0 10,001-25, | 000 | 25,001-50,000 50,001-100,000 More than 100,000 |
| 19. How much do you estimate your assets to be worth? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$10,000,00 \$50,000,00 | 1-\$10 million 01-\$50 million 01-\$100 million 001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| 20. How much do you estimate your liabilities to be? | | \$10,000,00 \$50,000,00 | 1-\$10 million 01-\$50 million 01-\$100 million 001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| Part 7: Sign Below | | | | |
| For you | and correct. If I have chosen to file un 11,12, or 13 of title 11, Un choose to proceed under of the fill out this document, I request relief in accorda I understand making a fals connection with a bankrup years, or both. 18 U.S.C. | der Chapter 7, I am awa nited States Code. I under Chapter 7. me and I did not pay or a I have obtained and rea nce with the chapter of t se statement, concealing otcy case can result in fir | are that I may proceed erstand the relief avail agree to pay someon d the notice required itle 11, United States g property, or obtaining the sup to \$250,000, or \$3571. | Code, specified in this petition. ng money or property by fraud in or imprisonment for up to 20 |
| | Signature of Debtor 1 Executed on9/30/2 | 016 //DD/XXXX | Signature of De Executed on | |

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| | | | 7 | |
|--|--|---|--|---|
| Fill in this information to identify your case: | | | And the second | 1.2 |
| Debtor 1 Devin | the state of the s | Griffin | The second secon | |
| First Name | Middle Name | Last Name | | 110000000000000000000000000000000000000 |
| Debtor 2 | C. C. C. Control Control Services | * Westerdam (New York) | | |
| (Spouse, if filing) First Name | Middle Name | Last Name | | • |
| Linited States Danismentary Count for the Alexander | | | | |
| United States Bankruptcy Court for the: No | rthem Dis | strict of <u>Illinois</u> (State) | | |
| Case number | The state of the s | (State) | 1 1000 | |
| (If known) | 4.000.00 | | on the second se | |
| Official Farms 400Day | | . , , , , , , , , , , , , , , , , , , , | *************************************** | Check if this is ar |
| Official Form 106Dec | | | | amended filing |
| Declaration About an I | ndividual Deb | tor's Sched | ules | 12/15 |
| | | | | 1211 |
| f two married people are filing together, bo | th are equally responsible | for supplying correct | information. | |
| Part 1: Sign Below Did you pay or agree to pay someone No Yes. Name of person | who is NOT an attorney to | Allen Corn | ruptcy forms? etition Preparer's Notice, Declaration, a | nd |
| | | Signature (Official Fo | | |
| • | • | • | | • |
| Under penalty of perjury, I declare that that they are true and correct. | I have read the summary | and schedules filed wi | ith this declaration and | |
| ✗ /s/ Devin Griffin 📗 🖟 | Jack | × | | |
| Signature of Debtor 1 | | Signature | of Debtor 2 | |
| Date 9/30/2016 | | Date | | |

MM/DD/YYYY

MM/DD/YYYY

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| First Name Middle Name Last Name 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business creditors, or other parties. No Yes. Fill in the details below. | s? Include all financial institution |
|--|--------------------------------------|
| creditors, or other parties. No | s? Include all financial institution |
| creditors, or other parties. No | s? Include all financial institution |
| ✓ No | |
| | |
| The state of the s | |
| Yes. Fill in the details below. | |
| | |
| Date issued | |
| | |
| Name MM/DD/YYYY | |
| ranc | |
| | |
| Number Street | |
| | |
| City State Zip Code | |
| | |
| rt 12: Sign Below | |
| bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 13 | 41, 1013, and 301 i. |
| Is/ Devin Grillin | |
| · · | |
| Date 9/30/2016 | |
| Date 9/30/2016 | |
| Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Offic | rial Form 107)2 |
| 214 year and a damental pages to real endement of rindred Andres for marvadas rining for Danki aptcy (Citic | Tari Onn 107): |
| No. | |
| | |
| | |
| Yes | - |
| ☐ Yes | |
| | |
| ☐ Yes | |
| Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? | on Prenarer's Notice |

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| ebtor Devin | | Griffin | Case number (if | |
|---------------------------------|--|--|--|--|
| First Name | Middle Name | Last Name | known) | 10 May 2012 15 15 15 15 15 15 15 15 15 15 15 15 15 |
| Your Unexpired Person | nal Property Leases | | Part 2: | A CONTRACTOR OF THE CONTRACTOR |
| | | chedule G: Executory C | ontracts and Unexpired Leases (Official | Form 106G), fill in the |
| ormation below. Do not list re | al estate leases. Unexpired lea lease if the trustee does not a | ases are leases that are s | still in effect; the lease period has not ye | t ended. You may assur |
| Describe your unexpired per | rsonal property leases | | Will the lease be a | ssumed? |
| Lessor's name: | | | ☐ No ☐ Yes | |
| Description of leased property: | | | | |
| Lessor's name: | | VIII. 1991 - VIII. A. C. | □ No □ Yes | отогия вотока поворя и от чем ме уста то на на также детока от |
| Description of leased | in the first of the control of the c | | | |
| Description of leased property: | | | | |
| Lessor's name: | | | No Yes | erinter erinter de de deue er erinter er e |
| Description of leased property: | | | | |
| Lessor's name: | | | ☐ No ☐ Yes | |
| Description of leased property: | | | | |
| Lessor's name: | | | ☐ No ☐ Yes | |
| Description of leased property: | | | | |
| .essor's name: | | | ☐ No ☐ Yes | and the second |
| Description of leased property: | | | | |
| .essor's name: | | | ☐ No ☐ Yes | |
| Description of leased property: | | | | |
| Sign Below | elare that I have indicated my in | ntention about any prop | erty of my estate that secures a debt an | d any personal |
| roperty that is subject to an i | | | | |
| /s/ Devin Griffin | to May | * | | |
| Signature of Debtor 1 | <u> </u> | Signatu | ure of Debtor 1 | |
| Date 9/30/2016 | | Date | | |
| MM/DD/YYYY | | | MM/DD/YYYY | |

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UNITED STATES BANKRUPTCY COURT

| | | C | hapter. | Chapter7 | |
|--------|----------------|----------------------|---------|----------|--|
| | Debtor(s) | | | | |
| In re: | Griffin, Devin | · Ci | ase No | | |
| | | | | | |
| | | Northern District of | | | |

VERIFICATION OF CREDITOR MATRIX

The above named Debtors hereby verify that the attached list of creditors is true and correct to the best of their knowledge.

| Date: | 9/30/2016 | /s/ Griffin, Devin De Will | | | | |
|-------|-----------|----------------------------|--|--|--|--|
| | | Griffin, Devin | | | | |
| | | Signature of Debtor / | | | | |

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| Debtor | 1 Devin | Griffin | | Case number | er (if known) | E-10-10-10-10-10-10-10-10-10-10-10-10-10- | | | |
|---|--|--|--|----------------------|---------------------------------------|---|---------------------------------------|--|--|
| A. 25-7 1 2 1 | First Name Middle | Name Last Name | | Column A Debtor 1 | | Column B Debtor 2 or | | | |
| Dor | mployment compensation not enter the amount if you contend that the | amount received was a benefit und | ler | \$0.00 | | non-filing spouse | · · · · · · · · · · · · · · · · · · · | | |
| | Social Security Act. Instead, list it here: | · | | | | | | | |
| | your spouse | | | | | | | | |
| 9.Pens | sion or retirement income. Do not include the social Security Act. | *************************************** | | \$0.00 | _ | | | | |
| amo payr inter | ome from all other sources not listed a unt. Do not include any benefits received u nents received as a victim of a war crime, a national or domestic terrorism. If necessa e and put the total below. | inder the Social Security Act or a crime against humanity, or | | | | | | | |
| Othe | er Government Assistance | | | \$190.00 | | | | | |
| Tota | amounts from separate pages, if any. | | | +\$215.00 | | + | | | |
| 11. Ca | Iculate your total current monthly inco Jumn. Then add the total for Column A to t | me. Add lines 2 through 10 for eac he total for Column B. | h | \$ <u>405.00</u> | _ + | | \$405.00 | | |
| | | | | | • | | Total current monthly income | | |
| Part 2: | Determine Whether the Means | Test Applies to You | | | | | monthly moone | | |
| | culate your current monthly income for | | | | · · · · · · · · · · · · · · · · · · · | | | | |
| 12a. | Copy your total current monthly income from | om line 11. | | | Copy li | ne 11 here → | \$405.00 | | |
| | Multiply by 12 (the number of months in a | year). | | | | | X 12 | | |
| 12b. | The result is your annual income for this p | art of the form. | | | | 12 | b. <u>\$4,860.00</u> | | |
| 13 Calc | ulate the median family income that ap | pplies to you. Follow these steps: | | | | | | | |
| Fill in | n the state in which you live. | Illinois | Accession to the second | | | | | | |
| Fill ir | the number of people in your household. | 1 1 | Non-removed. | | | | | | |
| | the median family income for your state a ehold. | and size of | international Property of the Control of the Contro | | | 13 | \$49,741.00 | | |
| instr | nd a list of applicable median income amo uctions for this form. This list may also be a v do the lines compare? | | | parate | | | | | |
| 14a. | · | 3. On the top of page 1, check box | 1, There is r | no presumption | of abuse. | | | | |
| 14b. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2. | | | | | | | | | |
| Part 3: | Sign Below | | | | | | | | |
| Ву | signing here, I declare under penalty of per | jury that the information on this sta | tement and i | n any attachme | ents is true a | and correct. | | | |
| | Isl Devin Griffin Da Ym | M. The same of the | × | · . | | | | | |
| | Signature of Debtor 1 | | Signatur | e of Debtor 2 | | | | | |
| | Date 9/30/2016 | | Date 9/3 | 30/2016 | | | | | |
| A. (1) | MM/DD/YYYY | Contraction of the second | M. M | M/DD/YYYY | | | 1000 | | |
| | you checked line 14a, do NOT fill out or fill | | | | | 4. | | | |
| <u>If</u> | you checked line 14b, fill out Form 122A-2 | and file it with this form. | | | | | | | |